

~~Mr. Muston~~ B.415
1. ~~Dr. Didsbury~~ G.407
~~2. Mr. Morley Parry~~ A.1421A.419
3. ~~Mr. Perry~~ A.405

the Health
of the
City of Leicester
during 196

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Health Committee

(as constituted 23rd May, 1968)

Chairman Coun N R Hanger, MPS, JP

Vice-Chairman Coun E A Proudman

Coun J E S Ellis
Coun Mrs C I Gilmore
Ald Miss M Goodwin, MBE, JP
Ald F G Gumbrill, CBE

Coun D W Hunt
Ald F J Jackson, JP
Coun I M Kerr
Coun D R Thorpe

Coun Mrs B I Turner
Coun P H Warner
Coun A R Williamson

Co-opted Members Dr A E Fairbrother Miss M H Perkins

The Committee will meet on the 3rd Friday in each month in the Committee Room, Town Hall, at 2.15 p.m.

Improvement Areas Sub-Committee Ald Miss M Goodwin, MBE, JP Coun NR Hanger, MPS, JP Coun D R Thorne
Ald F G Gumbrill, CBE Coun E A Proudman Coun A R Williamson

Senior Public Health Officers

Medical Officer of Health B J L Moss, *MB, BS(London), MRCS, LRCP, DCH, DPH*

Deputy Medical Officer of Health D F Henley, *MB, BS, DPH (appointed as from 9.1.67)*

Senior Medical Officer (Epidemiology & General Duties) D R S Leslie *MB, ChB, DIH, DPH (resigned as from 13.8.67)*

Senior Medical Officer for Child Health Mary Tate, *MB, ChB, DCH, DObsRCOG*

Consultant Chest Physician C M Connolly, *BSc, MD, MRCP, DPH*

City Analyst E R Pike, *BSc(Aston), MPhA, MPS, FIFST, FRIC*

Chief Public Health Inspector G A Hiller, *FRSH, FAPHI*

Chief Administrative Assistant G Quick, *ARSH (retired as from 1.4.67)*
G Cree *DMA (appointed as from 22.5.67)*

Chief Administrative Nursing Officer Jane I Jones, *SRN, SCM, QNS, HV, HV Tutor's Cert*

Chief Mental Welfare Officer S A Goodacre

Chief Ambulance Officer J E Oswell, *FICAP*

Home Help Organiser Florence E Pole

*To the Chairman, the Lord Mayor, and Members of the
City Health Committee*

Mr. Chairman, my Lord Mayor, Ladies and Gentlemen,

1967 has been a year of great challenge due to the increasing volume, and also increasing complexity, of the work undertaken by the Department.

Forward projections of the population carried out early in the year showed that fairly substantial increases were to be expected to occur in a number of age groups. Some of these are set out in the Table below:

<i>Age</i>	<i>1967</i>	<i>1970</i>	<i>1976</i>		
0-4	23,690	23,830	+0.6%	25,880	+9%
5-14	42,220	45,610	+8%	50,350	+19%
65+	37,020	38,900	+5%	43,250	+16%

Although the estimates were based upon the 1966 sample Census, evidence has accumulated throughout the year to suggest that the increases indicated could well be fulfilled earlier than forecast.

When illness occurs in a community there is an immediate clamour for its eradication, but there is always greater reluctance to spend money on developing services aimed at the prevention of illness and the protection of the public. Up to the present time financial restriction and recruitment difficulties have thwarted all attempts to develop facilities adequate to meet previously existing needs. Now, with the added burden created by the arrival of a considerable number of immigrants resources available are inadequate to meet the needs.

The total population of Leicester according to the Registrar General is 282,800, and from our own calculations based upon the population of immigrants in schools and immigrant births it is believed that the immigrant population is about 25,000 (8%).

At the end of 1967 there were 9,421 immigrant children under the age of 5 known to the health visitors, and a further 4,500 immigrants are attending City schools. Two or three years ago when the numbers were small there were few difficulties but as the numbers rapidly mounted, particularly as the proportion of non-English speaking immigrants increased, the problems confronting both the Public Health Inspectors and Health Visitors became more acute. On the one hand there is the problem of attempting to supervise a nomadic immigrant population in some 1,400 houses in multiple occupation, and on the other hand the almost impossible task of providing even the simplest education in matters of health when confronted with a shortage of health visitors which is 25% below an establishment fixed many years ago before the current problems existed.

The proportion of families with young children is approximately equal in the three divisions of the City, but within these divisions there are high concentrations of families and young children in both the Highfields and Belgrave area. Every effort has been made to concentrate staff in these high risk areas, but without further seriously depleting the limited service already provided in the peripheral parts of the City it has been found impossible to visit 14% of the children and 57% of the families in the Central Division. This in fact means that in order to try to provide the maximum cover for the Highfields Area most of the division is getting virtually no Health Visiting Service. This shortage of Health Visitors has seriously reduced the opportunity for her to give adequate advice to families in need of help to improve and maintain their standard of health and the care they provide for their children.

Because of language difficulties these visits are of longer duration and must be repeated more frequently. Although one in eight visits (10,000 visits) made by Health Visitors are to immigrant families these are pitifully inadequate if we are seriously to try to help them to integrate, if we are to help them to fight infection and to become healthy citizens of Leicester.

Comment has been made by the Chest Physician regarding the rise in tuberculosis. New notifications of tuberculosis amongst immigrants now exceed those from the remainder of the indigenous population. Two very small areas of the City each account for 42% of the tuberculosis cases. The marked rise in this disease shown in the graph on page 77 must be taken as a serious warning, particularly the rise in non-pulmonary tuberculosis.

62% of new patients referred to the Home Help Service were over the age of 65 at the time of the first referral, and 72% of the total case load is now over this age (2069). This represents a 17% increase over the past four years. A similar picture is revealed on examining the statistics of the Home Nursing Service where there has been a 7% increase in visits to the elderly and also an increase of 4% in the proportion of heavy nursing care cases during the last year alone. The heavy nursing cases require not only more frequent visiting but each visit may occupy as long as three-quarters of an hour, and in some cases necessitates the use of two nurses at a time, 52% of the total elderly cases (1569) now are 'heavy cases'.

The rehabilitation programme now in operation at Hillcrest Hospital, together with the close liaison that has developed between the Local Authority staff and the hospital as a result of the weekly Ward rounds and discussions, has facilitated a greater turnover of patients. Sociological reports provided through the Divisional Nursing Officers and the Welfare Officers are of great assistance in the assessment of patients' capabilities in relation to their home environment. The idea of short-term

admission for patients to receive specialist treatment has been welcomed by patients and relatives. The relatives have readily accepted that admission is only for a temporary period to give them some respite. This scheme has been of inestimable value in relieving relatives and preventing a complete breakdown in families.

Whenever possible the Housing Department when approached regarding the rehousing of old people have endeavoured to find accommodation most suited to their particular needs and if possible near to relatives. Similarly, Officers of the Welfare Department have been most helpful in arranging for the provision of ramps, widening doorways and supplying various articles of equipment.

The clear need for a day hospital and later, perhaps, a day centre has been the outcome of discussion that has taken place with the Consultant Geriatrician. Many old people, particularly those living on their own, and who are handicapped by disease associated with their age, would benefit considerably by the opportunity to attend on a regular basis for social rehabilitation as well as physical treatment. This measure would be of great value in preventing the insidious deterioration that occurs in many old people who are left on their own.

Although the process of ageing cannot be halted entirely, many old people would benefit from day care and treatment before the progress of degeneration has become too far advanced.

An account has been given of only some of the problems, others are touched upon in the body of the Report. One fact, however, which stands out is that any further delay in heeding the warnings in regard to the need for better Local Authority facilities can only result in a longer hospital waiting list and an increase in the prevalence of sickness. Concern is already expressed by the hospitals that beds are being blocked by old people. This is not because of the failure of the younger generation to accept their elderly relatives back home from hospital, for a number of surveys have

shown that relatives are, indeed, willing to shoulder this responsibility if they can receive adequate support from domiciliary services.

Special tribute is paid to four long serving members of staff who have retired during the course of the year—Miss E. E. Battle, Mr. H. Clough, Mrs. D. R. Smith and Mr. G. Quick. In thanking them for their support over the years, they can be assured that their devoted service has paved the way for many of the developments now taking place.

At the same time a welcome is extended to Mr. G. Cree who has joined the department as Chief Administrative Assistant.

Finally, Mr. Chairman, I would like to thank you and the Committee for your help, guidance and support over the last year.

I am,

Mr. Chairman, my Lord Mayor, Ladies and Gentlemen,

Your obedient servant,

B. J. L. MOSS, M.B., B.S., D.P.H.

Medical Officer of Health

Health Department
Midland House
52-54 Charles Street
Leicester
(Tel. No. 25732)
12th August, 1968

Vital Statistics Summary of statistics for the year 1967

	1967	1966
Population (estimated), mid-1967	282800	279030
Population at Census, 23rd April 1961	273298	
Marriages	2871	2698
Area Comparability Factor: Births	1.04	1.04
Deaths	0.98	0.95
Live births (corrected):		
Number	5267	5117
Rate per 1000 population (standardised birth-rate=19.36)	18.62	18.34
Number of illegitimate live births	668	618
Illegitimate live births per cent of total live births	12.68%	12.08%
Stillbirths: Number	89	85
Stillbirth rate per 1000 total live and stillbirths	16.62	16.34
Illegitimate stillbirth rate per 1000 total illegitimate live and stillbirths	14.75	20.60
Total live and stillbirths	5356	5202
Infant deaths (deaths under one year)	112	138
Infant Mortality Rates:		
Total infant deaths per 1000 total live births	21.26	26.97
Legitimate infant deaths per 1000 legitimate live births	20.87	26.01
Illegitimate infant deaths per 1000 illegitimate live births	23.95	33.98
Neo-natal mortality rate (deaths under four weeks per 1000 total live births)	15.38	16.61
Early neo-natal mortality rate (deaths under one week per 1000 total live births)	13.86	14.46
Perinatal mortality rate (stillbirths and deaths under one week combined per 1000 total live and stillbirths)	30.25	30.57
Illegitimate perinatal mortality rate (illegitimate stillbirths and illegitimate deaths under one week combined per 1000 total illegitimate live and stillbirths)	29.50	44.37
Legitimate perinatal mortality rate (legitimate stillbirths and legitimate deaths under one week combined per 1000 total legitimate live and stillbirths)	30.35	28.66
Maternal mortality (including abortion):		
Number of deaths	-	3
Rate per 1000 total live and stillbirths	0.00	0.58
Deaths (corrected for transferable deaths)	3312	3412
Death-rate (standardised death-rate=11.48)	11.71	12.23
Area of City (in acres)	18144	18144
Number of inhabited tenements, January 1968	90616	90400
Number of empty houses, January 1968	1833	1904
Rateable Value at 1st April 1967	£14459999	£14094861
General Rate for the year 1967-68	11/11d in £	11/11d in £

	<i>Registrar-General's figures</i>	<i>England and Wales</i>	
	1967	1966	
Birth-rate	17.2	17.7	
Death-rate	11.2	11.7	
Infant mortality rate (per 1000 births)	18.3	19.0	

Causes of death at different periods of life during 1967

Cause of death	Total sex all ages		4 wks under and four under wks 1 year	Age in years									
				1—	5—	15—	25—	35—	45—	55—	65—	75+	
1 Tuberculosis, respiratory	m 6 f 4		.	.	.	.	.	.	.	3	1 2	1 2	1 .
2 Tuberculosis, other	m 1 f 2		.	.	.	.	1	.	.	1	.	.	1 .
3 Syphilitic disease	m 3 f 1		.	.	.	.	.	.	.	.	.	1 .	2 1
9 Other infective and parasitic diseases	m 2 f .		.	1	.	.	.	.	.	.	.	1 .	.
10 Malignant neoplasm, stomach	m 45 f 34		.	.	.	.	.	.	2	3	17 5	13 10	10 19
11 Malignant neoplasm, lung, bronchus	m 155 f 19		.	.	.	.	.	1	.	11 1	64 7	57 6	22 3
12 Malignant neoplasm, breast	m . f 66		.	.	.	.	.	.	2	9	12	26	17
13 Malignant neoplasm, uterus	f 20		.	.	.	.	.	.	2	3	5	5	5
14 Other malignant and lymphatic neoplasms	m 161 f 158		.	.	1	1	4	1	4	27	35	48	40
15 Leukaemia, aleukaemia	m 11 f 8		.	.	1	1	.	1	.	2	2	4 1	2 1
16 Diabetes	m 9 f 14		.	.	.	.	.	.	2	1	1	2 3	3 6
17 Vascular lesions of nervous system	m 207 f 318		.	.	.	.	.	4	5	7	35	63	93
18 Coronary disease, angina	m 359 f 218		.	.	.	.	.	1	10	32	101	119	96
19 Hypertension with heart disease	m 19 f 27		.	.	.	.	.	.	2	5	29	67	115
20 Other heart disease	m 150 f 290		.	1	.	.	.	2	2	7	15	52	72

Causes of death continued

	Cause of death	Total sex all ages	4 wks under and four wks 1 year	Age in years										
				1—	5—	15—	25—	35—	45—	55—	65—	75+		
21	Other circulatory disease	<i>m</i> <i>f</i>	44 72	1	:	:	:	:	1	1	2	11 3	14 11	16 54
22	Influenza	<i>m</i> <i>f</i>	1 3	:	:	1	:	:	:	:	:	:	2 2	1
23	Pneumonia	<i>m</i> <i>f</i>	95 108	1 2	4 3	1	:	:	:	2 5	8 7	22 21	58 69	
24	Bronchitis	<i>m</i> <i>f</i>	112 51	:	3 8	2	1	1	2	6 4	16 5	44 14	41 18	
25	Other diseases of respiratory system	<i>m</i> <i>f</i>	18 10	:	3 2	:	:	:	1	1	5 2	4 2	5 3	
26	Ulcer of stomach and duodenum	<i>m</i> <i>f</i>	12 3	:	:	:	:	1	2	1	4	5 1	1	
27	Gastritis, enteritis and diarrhoea	<i>m</i> <i>f</i>	8 15	:	2 2	:	1	:	1	1	2 2	4 3	7	
28	Nephritis and nephrosis	<i>m</i> <i>f</i>	10 8	:	:	:	1	2	1	2	1	1 2	4 3	
29	Hyperplasia of prostate	<i>m</i>	10	:	:	:	:	:	1	1	3	6		
31	Congenital malformations	<i>m</i> <i>f</i>	8 13	5 7	1 1	2	1	2	1	1	1	1		
32	Other defined and ill-defined diseases	<i>m</i> <i>f</i>	115 135	32 32	1	2	3	3	2	9 6	4 9	18 11	16 24	28 44
33	Motor vehicle accidents	<i>m</i> <i>f</i>	28 15	:	:	1	:	7 2	1	1 2	3 2	5 2	6 3	5 2
34	All other accidents	<i>m</i> <i>f</i>	34 47	:	2 3	2	3	1	3	4 1	2 2	1 2	5 5	11 32
35	Suicide	<i>m</i> <i>f</i>	16 14	:	:	:	2	3	1	3 2	4 3	2 3	1 2	
	Total all causes	<i>m</i> <i>f</i>	1639 1673	38	15	6	9	22 11	20 8	46 36	118 76	350 179	493 402	522 888

Blind Persons

I am indebted to Mr K J Powell, *FISW*, Director of Welfare Services for the information included in this Section.

Classification according to age (at date of registration) of **blind persons** registered in 1967
 These figures include 14 cases (5 male, 9 female) transferred from the partially sighted register

	0	1	2	3	4	5-10	11-15	16-20	21-29	30-39	40-49	50-59	60-64	65-69	70-79	80-84	85-89	90+	Total	
	<i>m</i>																			
Cataract	<i>m</i>	1	4	3	3	1	7	
	<i>f</i>	.	.	.	.	.	.	.	.	.	.	.	.	2	4	6	1	17
Glaucoma	<i>m</i>	.	.	.	.	.	.	.	.	.	.	.	1	1	2	1	.	5
	<i>f</i>	.	.	.	.	.	.	.	.	.	.	.	.	1	1	3	.	5
Retrobulbar	<i>m</i>	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Fibroplasia	<i>f</i>	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Others	<i>m</i>	1	.	.	1	2	4	2	2	4	4	1	23	
	<i>f</i>	1	.	.	2	2	2	1	11	5	4	1	31	
Total	1	.	.	3	4	6	5	7	22	18	20	2	88

Classification according to age (at date of registration) of **partially sighted persons** registered in 1967

	0	1	2	3	4	5-10	11-15	16-20	21-29	30-39	40-49	50-59	60-64	65-69	70-79	80-84	85-89	90+	Total	
	<i>m</i>																			
Cataract	<i>m</i>	.	.	.	.	.	.	.	.	.	.	.	.	.	1	1	4	1	2
	<i>f</i>	.	.	.	.	.	.	.	.	.	.	.	.	.	1	1	.	.	8
Glaucoma	<i>m</i>	.	.	.	.	.	.	.	.	.	.	.	.	.	.	1	.	.	1
	<i>f</i>	.	.	.	.	.	.	.	.	.	.	.	.	.	2	3	.	.	5
Retrobulbar	<i>m</i>	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Fibroplasia	<i>f</i>	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Others	<i>m</i>	.	.	.	.	.	.	.	.	.	1	2	.	1	1	4	1	.	9
	<i>f</i>	.	.	.	.	.	.	.	.	.	1	1	.	2	1	7	4	.	16
Total	1	.	2	2	3	2	14	14	4	.	42

Follow-up of registered blind and partially sighted persons 1967

1 Number of cases registered during the year in respect of which section F of form BD8 recommends:	Cataract	Glaucoma	Retrobulbar Fibroplasia	Others
a No treatment	8	8	.	39
b Treatment (medical, surgical or optical)	26	5	.	30
2 Number of cases at 1b above which on follow-up action have received treatment:	11	4	.	24

This report concerns the seventh complete year since the Mental Health Act 1959 became fully effective and trends can be observed by a study of the comparative statistics shown in the various tables.

An improved staff structure, to lead to a better Mental Health Service was agreed in 1966 but it was not until early 1967, when most vacant posts had been filled, that the Hospital/Community integrated service was fully implemented. This combined service is administered by the Medical Officer of Health, the Hospital Management Committee contribute financially and a joint committee considers staff appointments.

Children who suffer from Mental Disorders are the responsibility of a specialist Health Visitor who is attached to the Mental Welfare Section on a full time basis.

The Staff Training Officer commenced his duties at the beginning of the year, and five Trainee Mental Welfare Officers were appointed soon after. A structured in-service training course for these officers was almost complete by the end of the year, and, with the return from full-time professional training of two Team Leaders, there has been a continuing move towards social casework methods in the Mental Welfare Section, and also towards the eventual aim of a fully qualified staff. One Mental Welfare Officer began a course of training in Psychiatric Social Work, and with the possibility of future secondment on professional courses of four officers at a time, the proportion of fully trained staff should continue to increase.

The arrival of the Training Officer has also made it possible to increase the amount of time given to the education of other professional workers and voluntary organisations. During the year thirty-six students visited the Section for periods ranging from half a day to one week, and arrangements were made for long-term placements for professional social work students to commence in January 1967. This has been one factor in the growing communication with Leicester University and certain Colleges of

Technology. Thirteen groups of professional workers in related fields received lectures from members of the section, as did thirteen voluntary groups. Public education in mental health and mental disorder is regarded as being an important attempt to change attitudes which it is hoped will have a preventative effect in due course.

Account of work carried out

Referrals

At the beginning of the year, the case load equalled 2422 active cases. During the year there were 1066 new patients referred to make a total number of 3488 dealt with during the year.

The source of referral of the 1066 new cases, coupled with 309 patients referred who were already known, is shown in table, page 23, which indicates the origin of referral of 1375 patients, all of whom were referred for action during 1967.

Admissions to Hospital

Of the 3488 patients dealt with during the year, 622 were admitted to psychiatric hospitals by officers of the Department, and 19 were admitted to Convalescent Home care. Follow-up was necessary in all but 27 instances. These exceptions usually occur when the admission is to a hospital outside our own area.

Of the 641 admissions

540 were to the Towers Hospital

20 were to the Carlton Hayes Hospital

59 were to the Glenfrith Hospital

2 were to the St. Andrew's Hospital

1 was to the Fairfield Hospital

19 were to Roecliffe Manor Convalescent Home

—

641 total admissions

Total admissions	1967	1966	1965	1964	1963	1962
	641	557	559	593	593	508
Subsequent action						
Admitted to	No.	Sec. 25	Informal	Discharged		
Towers Hospital	38	21	9	8		
Carlton Hayes Hospital	4	2	1	1		
Total	42	23	10	9		

Admissions to the Towers Hospital from the Leicester City Area						
during	1967	1966	1965	1964	1963	1962
Mental Welfare Officer participation	540	457	467	492	499	433
%	50·8	44	48·5	49	51·5	49·8
Direct admission	523	585	499	508	469	438
%	49·2	56	51·5	51	48·5	50·2
Total	1063	1042	966	1000	968	871

The admission method of the 641 patients was as follows:

Admission method (M.H Act 1959)	New patient	Patient already known	1967		1966		1965		1964		1963		1962	
			Total No.	%	Total No.	%	Total No.	%	Total No.	%	Total No.	%	Total No.	%
Informal	197	118	315	49·30	267	48·00	274	49·00	296	50·00	286	48·25	211	41·75
Section 29	23	19	42	6·50	62	11·10	94	17·00	72	12·15	158	26·65	173	34·00
Section 25	101	68	169	26·30	129	23·10	75	13·00	114	19·20	42	7·05	18	3·75
Section 26	2	9	11	1·70	16	2·90	7	1·25	4	·65	8	1·35	9	·75
Section 60	4	10	14	2·20	7	1·25	10	1·75	4	·65	5	·85	4	1·75
Temporary care	.	58	58	9·00	61	10·95	55	10·00	57	9·60	51	8·60	37	7·00
Returned patients	5	27	32	5·00	15	2·70	44	8·00	46	7·75	43	7·25	56	11·00
Total	332	309	641	100	557	100	559	100	593	100	593	100	508	100

The corresponding figures for the previous years are shown in the table opposite.

Subsequent action within 3 days of admission in respect of the 42 patients who were admitted to Hospital in accordance with Section 29 (Emergency) is shown opposite.

It is estimated that there were a further 523 direct admissions to the Towers Hospital from the Leicester City area. The term "direct admissions" means, in this instance, that there was no mental Welfare Officer participation.

The table opposite enables comparison to be made with previous years.

Of the 58 patients who were afforded temporary care, 39 were admitted to the Glenfrith Hospital and 19 were accommodated at the Roecliffe Manor Convalescent Home.

The 32 returned patients had inadvisedly left hospital and on being reported absent to the Mental Welfare Officer they were subsequently located and they agreed to their re-admission on the same day. 31 of these concerned Towers Hospital patients and 1 the Glenfrith Hospital.

Of the 59 admissions to the Glenfrith Hospital, 20 patients were admitted for long stay care and 39 were admitted for short stay or temporary care, either to afford relief for parents or for diagnosis and treatment. Domiciliary visits or out-patient clinic appointments are arranged whenever necessary and usually precede a diagnosis of suitability for long stay care.

Table of comparisons between first admissions and re-admissions

Community Care

Of the 3488 patients dealt with, 1583 ceased to be active cases by the end of the year.

Those referred who did not need hospital care or further community support after initial action had been taken 327

Those who were admitted to hospital, but City Mental Welfare Officers' follow-up was not necessary 27

Finalised cases, no further need for community care, including those who died, left area, were lost trace of, etc. 1229

Total deletions from case load during 1967 1583

At the end of the year there were 1905 live cases on the register and the age distribution and the type of disorder of these patients is shown in the following table.

Age	Mental illness		Psychopathic disorder		Subnormal		Severely Subnormal		Total		Grand Totals					
	m	f	m	f	m	f	m	f	m	f	1967	1966	1965	1964	1963	1962
Under 16 years	8	12	.	.	20	21	139	110	167	143	310	259	270	190	178	159
16-30 years	104	145	6	.	68	47	104	73	282	265	547	749	794	668	670	571
31-60 years	231	333	2	2	12	25	131	74	376	434	810	1082	1473	1335	1150	1010
Over 60 years	49	150	.	.	4	7	4	24	57	181	238	332	438	395	290	239
Total	392	640	8	2	104	100	378	281	882	1023	1905	2422	2975	2588	2288	1979

Hostels and training centres

Runcorn House

This psychiatric hostel was designed for mentally ill persons for short stay purposes but occasionally it has been found necessary to admit a high grade subnormal patient because of the lack of accommodation elsewhere. The aim is to have 21 residents, keeping 2 emergency beds in reserve, and at the end of the year there were 19 in residence. During the year there were 20 admissions and 22 departures; 16 of those who left made a return to living in the community and 6 returned to Hospital. The residents were drawn from the following.

The Towers Hospital	12
Carlton Hayes Hospital	1
Leicester Prison	1
St. Audrey's Hospital	1
No fixed abode	1
Community	4
 Total admissions	 20

The length of stay of the residents of those who left was as follows:

1 week	2
2 weeks	2
1 month	1
2 months	2
3 months	1
4 months	3
6 months	2
8 months	1
11 months	2
12 months	1
14 months	1
15 months	1
17 months	2
20 months	1
 Total	 22

Some of the residents' stay has been longer than was anticipated but the development towards full integration into the community will be helped by the co-operation of the Housing and Welfare Departments. The formation of a

group of understanding landladies is behind schedule but it is considered that it is a very important step towards community acceptance and this possible development continues to be pursued.

Plans are well in hand for a second hostel to provide mainly for medium or high grade persons who suffer from subnormality. Longer stay facilities will be necessary in this establishment.

The Emily Fortey School

The school is now purely a junior training centre.

During the year at the school there were 19,095 actual attendances (86·32%) out of a possible 22,119.

The age range of pupils attending was at the end of the year as follows:

		<i>m</i>	<i>f</i>	Total
Under	5	.	.	.
Aged	5	5	2	7
	6	7	4	11
	7	8	5	13
	8	3	6	9
	9	3	4	7
	10	10	5	15
	11	9	10	19
	12	2	5	7
	13	6	4	10
	14	6	4	10
	15	4	2	6
	 Total	 63	 51	 114

Special Care Unit

A detached special care unit has been built to accommodate 20 severely handicapped children between the ages of 5 and 16 years, many of whom have physical as well as mental disorders.

Care of Autistic Children

The total number of autistic children known to the Authority is 17. They are all under the care of the Consultant Child Psychiatrist.

Responsibility for providing services for these children lies partly with the Education Committee and partly with the Health Committee; 5 of the children are at present attending the Emily Fortey School.

A unit to provide day special education for 6-8 autistic children is at present under construction. It will be situated at Belvoir House and is expected to open early in 1968. It is stressed, however, that this form of provision is very much in the experimental stage and may not be suitable for all autistic children.

Dental inspection and treatment

at Emily Fortey School 1967

(A) First inspection of pupils at school	97
(B) First inspection of pupils at clinic	1
(C) Number of A+B found to require treatment	61
(D) Number of A+B offered treatment	16
(E) Pupils re-inspected at school or clinic	9
(F) Number of E requiring treatment	2
Permanent teeth filled	.
Deciduous teeth filled	2
Permanent teeth extracted	24
Deciduous teeth extracted	47
General Anaesthetics	22
Patients X-rayed	.
Prophylaxis	.

Fosse Industrial Unit

Industrial activity throughout the past year has been maintained at a very high level and we are now finding work for over 200 men and women on the register. A variety of work is undertaken, to provide stimulation and interest as well as income for payments to the trainees. Resulting from the increase in activity and demands on supervision, an additional male supervisor was appointed to specialise in the technical aspects of production, and he is also responsible for the manufacture of our own products.

Experiments in the training of the mentally handicapped, with a view to offering greater employment prospects, are continuing within the limits of work availability. In this connection the general economic situation during the last

12 months has not helped matters. Notwithstanding this, quite a number of trainees have had the opportunity of working in open industry for trial periods, where they gained valuable experience as part of their overall training programme.

Up to 20 pupils from the Junior Training Centre attend each Thursday, working alongside the older trainees. Very few problems have resulted from this policy and where minor ones have arisen, they have been outweighed by the immeasurable advantages.

There were 39,738 attendances (86·14%) out of a maximum possible 45,812.

Admissions are arranged and absentees are followed up by the field work officers of the Mental Welfare Section.

Admissions from outside employment	15
Admissions from Home	45
Admissions from Emily Fortey School	8
Admissions from Towers Hospital	19
Admissions from Glenfrith Hospital	7
Total	94

Of those who commenced attendance and afterwards left there were:

Left to take up outside employment	12
Readmitted to hospital	12
Unwilling to continue to attend	30
Total	54

In cases when the willingness to attend ended, these have to have the further attention of the Mental Welfare Officer either to place them elsewhere or to arrange their re-attendance when a greater state of co-operation provides. Over the years the numbers attending training establishments have increased as follows:

	Year	1967	1966	1965	1964	1963	1962	1961	1960	1959	1958	1957
Emily Fortey School		114	119	101	113	128	136	126	144	124	128	127
Red Cross Crèche		22	23	23	23	.	.	.	.	.	.	.
Braunstone Avenue (Pilot Adult Centre)		10	.	.	.	.
Spittlehouse Street (Pilot Adult Centre)		.	.	.	40	40	24	.	.	.	.	.
Glenfrith Hospital Workshop (temporary)		.	.	.	30	.	.	.	.	.	.	.
Fosse Industrial Unit		208	168	126	.	.	.	.	.	.	.	.
Special Care Unit		13	.	.	.	.	.	.	.	.	.	.
Total		357	310	250	206	168	160	136	144	124	128	127

General

The integrated team system continues to work with increasing success. Consultant Psychiatrist, General Practitioner, Mental Welfare Officer basic group co-opts members of other branches of the Health and Welfare services without difficulty when occasion demands.

The continued close working with the School Health and Child Health services is of the utmost value and this is reflected by the ready co-operation of parents which has not always been as good as it is today. We need perhaps to do more for youth as a particular group but in general the adult services progressively improve.

Earlier referral of all with related mental disorder means a greater number of referrals. This means that more time has to be spent on new cases who need community support. It is most essential that no opportunities are lost on public education. Voluntary workers, many of whom are allied in the ranks of the Leicester Association for Mental Health and the Leicester Society for Mentally Handicapped Children, already understand many of the needs and are doing invaluable work. The former two Associations provide, together with the Hospital Friends, Social Clubs and other facilities for the mentally disordered. The British Red Cross Society, financially helped by the local authority provides Nursery crèche facilities for the under 5's.

Many other volunteers are also helping the professionals to bridge the gap concerning public awareness and community acceptance. Understanding landladies and sympathetic employers are necessary if rehabilitation and integration are to keep pace with the increasing number of new problems being referred.

Source from which all patients were referred

	Mentally ill				Psychopathic disorder				Subnormal				Severely subnormal				Totals				Grand Totals and percentages for year				
	<16		16+		<16		16+		<16		16+		<16		16+		<16		16+		1967	1966	1965	1964	1963
		m	f	m	fm	f	m	f	m	f	m	f	m	f	m	f	m	f	m	f					
General Practitioners	.	2	55	104	.	.	.	.	.	2	3	.	.	.	.	.	2	57	107	166	191	180	159	167
																				12%	15%	16%	16%	16%	
Hospitals during in-patient treatment	.	2	22	19	1	.	2	5	1	.	7	9	2	2	31	33	68	75	92	87	76
																				5%	6%	8%	9%	7%	
Hospitals after or during out-patient or day-patient treatment	.	.	.	5	.	.	.	.	.	.	.	.	.	.	.	.	.	.	5	5	12	18	15	21
																				1%	1%	2%	1%	2%	
Hospitals after in-patient treatment	.	.	17	20	.	.	.	.	.	.	3	.	.	.	.	.	.	17	23	40	71	61	47	57
																				3%	6%	5%	5%	5%	
Local Education Authorities	.	.	.	.	.	.	.	.	.	16	8	6	9	1	.	6	9	17	8	40	41	29	17	25
																				3%	3%	3%	2%	2%	
Police and Courts	.	.	32	29	.	.	.	.	2	2	2	.	.	4	.	.	2	38	31	71	60	60	58	51
																				5%	5%	5%	6%	5%	
Patients themselves	.	.	19	34	.	.	.	.	.	.	.	.	.	.	.	.	.	19	34	53	54	49	37	31
																				4%	4%	4%	4%	3%	
Relatives	1	.	27	47	1	.	4	8	37	17	2	7	39	17	33	62	151	142	121	106	130
																				11%	11%	10%	10%	12%	
Associates, friends, landlords, neighbours, employers	.	.	12	20	.	.	.	.	.	.	1	.	.	.	.	.	.	12	21	33	34	25	32	37
																				2%	3%	2%	3%	3%	
Social agencies including other authorities and departments and voluntary agencies	.	1	84	109	2	1	11	9	16	9	.	1	18	11	95	119	243	283	156	124	118
																				18%	22%	14%	12%	11%	
Consultant Psychiatrists	3	4	155	254	1	2	2	3	.	1	3	3	4	7	160	260	431	229	212	243	275
																				31%	18%	18%	24%	26%	
Other medical officers including L G H, L R I, unofficial L E A	.	3	25	25	.	.	.	.	1	1	5	.	8	6	.	9	10	30	25	74	87	151	78	91
																				5%	7%	13%	8%	8%	
Totals	4	12	448	666	6	6	44	42	68	42	17	20	78	60	509	728	1375	1279	1154	1003	1079

Care of Mothers and Young Children

Care of Mothers and young children

Infant deaths	Legitimate										Illegitimate										All infant deaths Grand Total
	Age at death		* Less than 24 hrs		** Under 1 week		Under 28 days		1 mth—less than 1 year		Total deaths		Less than 24 hrs		Under 1 week		Under 28 days		1 mth—less than 1 year		
	Cause of death	m	f	m	f	m	f	m	f	m	f	m	f	m	f	m	f	m	f	m	f
Birth injury	3	1	3	1	3	1	.	.	3	1	.	.	.	.	.	.	.	.	.	.	4
Asphyxia, Atelectasis	3	1	3	3	3	3	.	1	3	4	1	.	1	.	1	.	1	.	1	.	8
Pneumonia, bronchitis	.	.	1	.	2	1	9	7	11	8	.	.	.	.	.	.	1	4	1	4	24
Other respiratory disease	.	.	.	.	.	.	1	.	1	.	.	.	.	.	.	.	.	.	.	.	1
Haemolytic disease	2	1	2	1	2	1	.	.	2	1	.	.	.	.	.	.	.	.	.	.	3
Haemorrhagic disease	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Haemorrhage	1	2	2	3	2	3	.	.	2	3	.	.	.	.	.	.	.	.	.	.	5
Prematurity	12	12	14	14	14	15	.	.	14	15	2	3	2	4	2	4	.	.	2	4	35
Chronic maternal illness	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Acute maternal illness	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Diseases, conditions of pregnancy	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Difficulties in labour	1	1	1	1	1	1	.	.	1	1	.	.	.	.	.	.	.	.	.	.	2
Placental/cord conditions	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Congenital malformations	2	6	4	8	5	9	.	.	5	9	.	.	.	.	.	1	.	1	1	.	15
Violence, accidental	.	.	.	.	.	.	1	1	1	1	.	.	.	.	.	.	1	.	1	.	3
Violence, deliberate	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Lack of care by ignorance	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Excessive cold/heat	1	.	1	1	1	1	.	.	1	1	.	.	.	.	.	.	1	.	1	.	3
Diarrhoeal disease	.	.	.	.	.	.	2	2	2	2	.	.	.	.	.	.	.	.	.	.	4
Other diseases of digestive system	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Septicaemia, sepsis of newborn	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Whooping cough	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Poliomyelitis	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Measles	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Meningitis, encephalitis	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Other virus disease	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Other bacterial disease	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Cancer, leukaemia	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Other tumours	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Tuberculosis	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Other disease of C N S	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Vague or undetermined causes	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Other	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Totals	25	24	31	32	33	35	13	11	46	46	3	3	3	4	4	4	2	5	6	9	107

Plus 5 "transfers-in" (112 recorded)

*Includes figures in previous column

**Includes figures in two previous columns

Diocese of Leicester Council for Social Work

Analysis of work done in 1967

Total number of cases referred	1967	1966
Illegitimate pregnancies	279	280
Matrimonial/family	28	32
	307	312
Brought forward from 1966 (babies unborn)	64	56
Active from previous years	55	46
	426	414

Adoption

Adopters' applications	359	299
accepted	233	218
refused	12	12
proceeding	44	15
referred elsewhere	16	54
Babies offered	232	193
placed	201	160
awaiting placement	12	4
placement postponed	3	4
withdrawn before placement (by mother)	22	20
withdrawn after placement	7	5

Handicapped children*Observation/Handicap Register*

Number on Observation Register at December 31st, 1967 3054

Number placed on Observation Register in 1967 2097

Two common reasons for placement on the Register were:

Birth weight below 5 lb. 215

Postmaturity, 42 weeks+ 416

*Handicap Register*Total number on Handicap Register
at December 31st, 1967 425

Number placed on Handicap Register in 1967 173

Congenital malformations detected at birth

Total in 1967 81

Talipes 23

Anencephaly 9

Spina bifida 6

Spina bifida with hydrocephalus 2

Spina bifida with anencephalus 1

Cleft lip and/or cleft palate 5

Polydactyly 8

Down's syndrome 2

Others 25

Total 81

20 of the children placed on the Register during the year
had died by December 31st, 1967.

Stillbirths

Total number 93

Born at home 5

Congenital abnormality
(Anencephalus in all cases) 10

Handicapped Children

Development Clinics

Work with young handicapped children and their parents has progressed and increased.

The Development Clinics, held twice weekly at Midland House, continued through the year. 256 children attended during 1967 compared with 59 in 1964 when the Clinics were started.

The Red Cross Crèche has continued to give valuable service on three afternoons a week, under the supervision of Mrs. Lewis. The need for extension of this Nursery work has become increasingly plain, and it is hoped before long to provide a part-time Training Day Nursery for young handicapped children. It will provide a focal point for the work, where children and parents can receive guidance and training, and it will also be a meeting place for parents and staff for discussion and exchange of views.

The appointment of a Specialist Health Visitor for physically handicapped children has already been of great value, and the work of the Health Visitor seconded to the Mental Health Department has continued to contribute greatly in the field of mental subnormality.

The Children's Department Residential Nurseries contain a high proportion of handicapped children, and the Senior Medical Officer has made regular visits to these children in Care.

Audiology

The screening of infants' hearing has continued. 2842 children were tested in 1967, 288 more than in 1966. Particular attention is paid to children at risk, but it is hoped to make the screening procedure a total one when the staff situation permits.

One assessment session per week at the Audiology Clinic has continued. The Clinic has dealt with testing the hearing acuity of infants from 7 months upwards, using all recognised methods, up to pure-tone and speech audiometry. A speech audiometer attachment has been obtained for tape-recording speech audiograms.

The Nebraska, and the Merrill-Palmer Intelligence Test materials have been obtained, for the assessment of non-communicating children.

The appointment of a Specialist Health Visitor for work with the deaf has greatly assisted liaison with the parents and families of these children.

Child Health Clinics

Although the number of Centres has remained the same (28), the number of sessions held has increased:

1966	—	1669
1967	—	1701

Child attendances have also increased:

1966	—	69610
1967	—	78925

It appears from these figures that the trend in Leicester is similar to that reported by the Sheldon Committee—that there is an increasing public demand for the services of Child Health Clinics.

The work of the Child Health Clinics has continued to be threefold:

- (1) Health Visitor advisory service.
- (2) Immunisation and vaccination.
- (3) Assessment of developmental progress of infants and young children by Medical Officers.

	Nursery Places	Attendances	Daily Average Attendances
Cossington Street	60	11193	45.8
Frank Street	50	10787	44.2
Fosse Road	45	10805	44.2
Fairway	35	6446	26.4
New Walk	35	6423	26.3
Sparkenhoe Street	50	9311	38.1

Number of children on Register at 31.12.67 264

Number of approved places 275

Average attendances in 1967, 6 nurseries 225.3

The following is the list of infectious diseases which occurred amongst attenders at the nurseries during the year:

Measles	29
Thrush	1
Impetigo	4
Sonne Dysentery	3
Mumps	20
German measles	17
Scarlatina	3
Chicken Pox	13
Whooping cough	1
Gastro-enteritis	1
Salmonella	1
Scabies	3

Day Nursery Service

The six day nurseries in the City provide 275 places for children from the age of 6 weeks to 5 years. A priority system of admission to the nurseries ensures that those in greatest need receive places. Unmarried or separated parents and illness of parents receive high priority; social, physical and mental handicaps are also given every consideration. However the number of requests for vacancies for the 2 to 5 year old children far exceeds the available places.

During the year the upgrading of equipment and decoration in the nurseries continued. All the staff appreciated the improvement in the facilities for the children and in the working conditions which resulted from this programme.

Dr. Mair of the Public Health Laboratory Service and the Nursery staff continue their efforts to control infectious diseases in the nurseries. Continuous sampling of specimens from the children is carried out in order to try and detect dangerous disease before an outbreak occurs in the nursery.

The admission of handicapped children continues, and has proved of great benefit to the children.

As at 31st December 1967: 111 were paying full charge
153 were on assessment
49 were on nil assessment

264

The full charge is 13/- per day.

Staffing the Day Nurseries

The difficulty of recruitment and retention of the qualified nursery nurses has again been a problem. Although at the same time there are many girls willing to do the nursery nurse training course and are not accepted for the course there are insufficient nursery places available. The Nursery Assistants (unqualified) make a great contribution in the nursery by the assistance they give in helping to take care of the children. Efforts to recruit grades of registered nurses are also made. In addition thought must be given to the sponsoring of students who specifically wish to work with the wider range of children found in a day nursery.

Nurseries and Child Minders Regulation Act, 1948

The work of supervision of the day care of children under 5 continues to take up a considerable proportion of the time of Nursing Officers and Health Visitors.

Registered Minders

	1967	1966	1965	1964	1963
Registered Minders	70	65	52	38	25
Number of children	296	278	295	226	150

During the year 20 persons were registered and the registration of 13 persons was cancelled.

Premises

Six premises were registered during the year and none were cancelled. There are now eleven premises registered to take 250 children for minding.

Play Groups

In 1967 the interest in forming Play Groups has grown and applications have been received for information from those who wish to provide facilities for play for children under 5 years of age. Some who provide facilities for one or two sessions a week only usually volunteer their services and expect no reward other than knowing that a good service is being provided through their efforts.

The Minister of Health has asked in his Circular No. 18/67 that all persons in contact with groups of children have an X-Ray examination of the chest. This is being carried out and will be repeated within 3 years for all helpers in the work of looking after children.

Dental Services for Expectant and Nursing Mothers and Children under 5 years

Part A Attendances and Treatment

Number of Visits for Treatment during year		
	Children 0-4 (incl.)	Expectant and nursing mothers
First visit	279	101
Subsequent visits	202	219
Total visits	481	320
Number of additional courses of treatment other than the first course commenced during year	12	12
Treatment provided during the year:		
Number of fillings	269	68
Teeth filled	233	67
Teeth extracted	603	266
General anaesthetics given	188	43
Emergency visits by patients	38	4
Patients X-rayed	5	9
Patients treated by scaling and/or removal of stains from the teeth (Prophylaxis)	27	40
Teeth otherwise conserved	1	.
Teeth root filled	.	1
Inlays	.	.
Crowns	.	.
Number of courses of treatment completed during the year	212	74

Part B Prosthetics

Patients supplied with F.U. or F.L. (First time)	17
Patients supplied with other dentures	10
Number of dentures supplied	45

Part C Anaesthetics

General anaesthetics administered by Dental Officers	1
--	---

Part D Inspection

Number of patients given first inspections during year	295	96
Number of patients who required treatment	242	96
Number of patients who were offered treatment	240	96

Dental Report for 1967

by E. T. Cunnell, B.D.S., Principal Dental Officer

The trend of less time being required for the dental need of Maternity patients, and of more time being spent on pre-school children has continued, and more conservative treatment was accomplished for these children in 1967.

There has also been, unfortunately, the need to extract more teeth for this age group, despite the continuous dental health education programmes undertaken, and more artificial teeth were supplied for the ante natal and post natal mothers.

It is hoped that with additional staff appointed, 1968 will prove to be a more successful year, and it is quite possible that in certain selected areas, parents of pre-school children will be informed of the advantages of dental care and encouraged to seek early inspection.

Despite the difficulties and disappointments of 1967 co-operation and encouragement from the members of the Health Committee and from the Medical Officer of Health have been forthcoming, and for these I wish to tender my thanks.

Part E Sessions

Number of Dental Officer Sessions (i.e. equivalent complete half days) devoted to Maternity and Child Welfare Patients:
For treatment 195
For Health Education .

Ante-natal clinics

Clinic	Attendances				Average per session
	No. of sessions	First visit	Re-visit	Total	
Stocking Farm	49	75	243	318	6.49
New Walk (a.m.)*	50	171	50	221	4.42
New Walk (p.m.)	50	185	135	320	6.4
Belgrave Hall	52	234	171	405	7.78
Uppingham Road	52	105	96	201	3.86
New Parks	51	153	49	202	3.96
Southfields Drive*	51	123	110	233	4.56
Valence Road	51	92	147	239	4.68
Thurnby Lodge	25	74	50	124	4.96
Totals	431	1212	1051	2263	5.25

*These became Midwives booking clinics as from 1.6.67.

Post-natal clinics

Clinic	First visits	Re-visits	Total
New Walk	28	.	28
Southfields Drive	4	.	4
Valence Road	3	.	3
Totals	35	.	35

The Post Natal Clinics where required took place at the end of an Ante Natal Session. The patients attended by appointment and the Midwife went if her work allowed.

Midwives

During 1967, 145 midwives notified their intention to practise. 43 were Municipal Midwives and 8 were in registered nursing homes. None notified Part III only. Of the remainder 93 were practising in maternity hospitals, and 1 had a private case booked.

Mothercraft and relaxation—See Ante Natal Classes, Page 86.

Midwives and general practitioner/obstetricians

The following figures indicate the distribution of work between municipal midwives in relation to the 1451 deliveries attended by midwives in 1967.

Deliveries attended by a midwife

a i	Doctor not booked, but present	2
ii	Doctor not booked, not present	55
b i	Doctor booked, and present	92
ii	Doctor booked, not present	1302
Total		1451

Allocation of maternity beds on sociological grounds

Domiciliary midwives make a full report on the home conditions of all applicants, and these are then considered by the Supervisor of Midwives.

Summary of above	
Number of applicants	1444
Number recommended	1158
Number not recommended	214

Five patients were placed on the waiting list, but all were eventually booked at hospital.

Of the remaining 72 cases:

- 14 moved away from Leicester
- 10 were delivered
- 10 miscarried
- 9 were booked on medical grounds
- 25 booked a home confinement
- 3 booked at private hospitals
- 1 booked at a "Mother and Baby" home

Prior to acceptance on socio-logical grounds

Patients confined in hospital

The planned early discharge scheme continued as before. The midwife visited these patients at least twice in the Ante-Natal period—once in order to advise them of the preparations they would have to make and a return visit to see that all was ready.

The numbers continued to rise. In each case the midwife visited the patients for 10 days and longer if necessary and then the care of the mother and baby was passed over to the Health Visitor.

Flying Squad

This was called twice by a doctor and arrived six times in response to a doctor's request to admit a patient to hospital. Of these, 7 patients did not receive a blood transfusion but were transferred to hospital and one patient also did not receive a blood transfusion and remained at home.

Roundhill Maternity Hospital Booking Clinic

At a meeting of the Leicester, Leicestershire and Rutland Maternity Liaison Committee held on Thursday, 12th October, 1967, it was reported that the Booking Committee now considered that there was no longer any need for this Committee to meet monthly. Most of the problems associated with bookings had been resolved and it was now considered reasonable to leave the routine bookings to the Matron and the General Practitioner Clinical Assistant. The Booking Committee however would be kept in being and could be called when necessary.

Summary of hospital discharges

Day of discharge	1	2	3	4	5	6	7	8	9	Total
Number of patients	256	593	305	129	150	231	479	505	183	2831

13,924 visits were paid to 2,831 patients before the 10th day.

Staffing

Although the establishment figure remains at 39, the staff in post was not deliberately kept to that figure due to the decrease in domiciliary confinements. On December 31st, 1967 there were 29 full time midwives and 7 part time midwives. During 1967 there were 6 new appointments and 4 resignations. Of these 1 left to emigrate to Australia and 1 to Canada. 1 married and moved from the city and 1 was taking her Health Visitor Course. 1 Full time midwife transferred to do part time midwifery owing to domestic reasons.

Summary of work done by municipal midwives

Area	Cases attended	Ante-natal	Visits		
			Post-natal	Socio-logical	Total
Full-time	1424	20420	32429	2835	55634
Part-time	27	1583	4341	666	6590
Totals	1451	22003	36770	3501	62224

The number of cases delivered on the district decreased by 178 in 1967—this is twice the number in the previous year. Sociological visits increased by 517. More babies continue to be born in hospital owing to the fact that more beds are still available for sociological cases. This accounts for the decrease in domiciliary visits as more mothers attend hospital for ante-natal care; and if necessary, the hospitals can keep the patients for a longer period, in some cases.

The language problem amongst the immigrant population continues to improve, although the assistance of an interpreter is still required in some cases. In these instances a member of staff is called upon. The mothers continue to realise more and more the importance of making preparations for their confinements.

There have been numerous changes in the range of midwives' duties owing chiefly to the decrease in the domi-

ciliary confinements. Apart from spending more time on ante-natal care, the midwives are able to visit the Leicester Royal Infirmary Maternity Hospital to learn new techniques. If they have to take one of their own patients to hospital, they frequently stay and either deliver the patient or take some part in the confinement. The midwives also hold their own booking clinics, and take blood samples when necessary. Some midwives attend General Practitioner Ante-Natal Clinics, where they are able to see their patients with the doctor, and discuss any problems that may arise. Midwives also receive training in relaxation so that they are able to teach the mothers this very important part of ante-natal care, and often help them to put it to good use at their confinements.

The help of the nurses' assistants is much appreciated at the Ante-Natal Clinics, both in the preparation of the clinics, and the clearing away at the end. This gives the midwives more time to spend with their patients.

All these various duties keep the midwife fully occupied, in spite of delivering fewer babies.

The National Co-operation Card

This card was introduced into Leicester in July. The patient keeps this card, and takes it with her on each visit to her doctor, midwife or hospital, so that all information is available as and when required. The use of the Co-operation Card by some General Practitioners is appreciated, and we hope that the trend to use this will continue.

The midwives' radio continues to be of great value to patients and midwives, the latter consider it to be one of their most important pieces of equipment. Tribute is once more paid to the excellent co-operation received from the Ambulance personnel in making this system of radio control such an efficient service.

Nursing services

Features of the Year

In order to facilitate the increased mobilisation of staff the use of special wireless equipment has been extended to Divisional Nursing Officers and Deputies. This enables them to be contacted when they are on their rounds on the district. These sets have been found particularly useful during the weekend.

A 3 x 12 telephone switchboard was installed in Belgrave Division to ease communication and plans are in hand for the remaining divisions to be supplied.

Extra office accommodation has been made available in Belgrave Division by conversion of a flat into offices, and the conversion of an office to a surgery.

The new head office accommodation in Midland House, Charles Street, has proved a great benefit as the health visitors are now able to personally contact other officers of the Health Department.

Management Training

One Deputy Divisional Nursing Officer attended a three months course in administration. Following three preparatory lectures 14 senior staff attended an introductory course on middle management arranged by the Ministry of Labour. The staff much appreciated it and a further course of lectures has been arranged for 1968. A similar course has been arranged to begin early 1968 for group advisers, senior district nurses and day nursery matrons.

Staffing

48 Health Visitors were in post at the end of the year. The whole time equivalent was 44·7. This represents a 22% shortage. 11 Health Visitors left the Service in 1967, 4 for personal reasons, 4 to other authorities, 1 retired and 2 to have babies. 9 Health Visitors were appointed to the staff and 4 students joined the staff on the completion of the Health Visitors Course.

Three group advisers were appointed (one to each division) to assist the Divisional Nursing Officers, particularly with the newly appointed Health Visitors, and student Health Visitors during the final three months of the course.

The functions of school nurses and clinic nurses have been combined and they are now designated clinic/school nurses.

A total of ten nurses' assistants are employed to help in the schools and child health centres.

In-Service Education

Four Health Visitors attended a course in Research Appreciation together with other members of staff.

A planned programme of lectures and films was given over a period of six months. The lectures included child assessments and screening techniques.

Additional Educational Activities

We have welcomed the visits of observation from senior students on administrative and teaching courses, and observers from other authorities.

It is often not appreciated that Health Visitors are actively involved in the practical teaching of students from hospitals. During 1967 these students numbered 226.

Co-ordination of Services for the Handicapped

In order to implement Joint Circular 7/66 Ministry of Health 9/66 Department of Education and Science, three specialist Health Visitors were appointed in 1967. In the

Department there are now four health visitors specially appointed for this work, one for the educationally subnormal, the mentally subnormal, the physically handicapped and the deaf.

The Health Visitor Training School

From July 1948, the inception of the Health Visitor Training School, to December 1967, 423 students have successfully completed the Course. 144 of these were City Bursary students who each undertook an eighteen month contract of service, following qualification. In this way the School has contributed not only to the recruitment of the City's health visiting staff but also the national pool of trained health visitors.

In September 1966, twenty-two students from fourteen local health authorities commenced the course but three left during the year owing to personal and domestic difficulties. Of the nineteen remaining, eighteen were successful in gaining the Certificate of the Council for the Training of Health Visitors together with three students who were unsuccessful the preceding year. The 1966/67 School was the first to enjoy the benefit of a full year of training which accords with the regulations of the Training Council. This extension of three months consisting of continuous supervised practical experience, although an additional responsibility to the senior health visiting staff of sponsoring authorities and to the tutors in the school, is of inestimable benefit to the students. In this connection tutors paid visits to Nursing Officers or Superintendent Health Visitors of sponsoring authorities.

The monthly meetings between Fieldwork Instructors and tutors continued with the mutual exchange of knowledge and discussion of problems encountered in student training. The Fieldworkers also made valuable contributions to Students' Seminars on practical aspects of the Course.

The Training School Advisory Panel met at quarterly intervals in order to formulate general policy.

Additional Educational Activities

During the year, tutors participated in the lecture programme of Speech Therapists, Home Office Courses and Nursery Nurse students. With a view to widening their knowledge of other disciplines, the students contributed to a piece of work produced by Junior Child Care Students.

Visitors welcomed to the School included a World Health Organisation Fellow and a Senior Administration student from the Royal College of Nursing. A Public Health Tutor student obtained part of her practical training in the School. Such visits are valued and enjoyed by tutors.

Health visiting		1967		1966
		H/V's	C/N/A's	
Number of first visits to children born 1967		5319	.	5246
Number of re-visits to children born 1967	14459	894	14663	
Number of visits to children born 1962/66	49024	516	48302	
Number of first visits to ante-natal cases	723	3	702	
Number of other visits to ante-natal cases	801	1	630	
Number of visits to tuberculosis patients	1515	288	1472	
Number of visits re tuberculin test readings and BCG follow-up	147	147	184	
Number of visits concerning infant deaths	95	1	102	
Number of visits concerning after-care	447	40	335	
Number of visits to diabetic patients	1475	.	1779	
Number of visits concerning applications for convalescent home accommodation	266	25	185	
Number of visits concerning infectious disease	501	419	988	
Number of visits concerning problem families	2191	7	2441	
Number of visits concerning re-housing	112	.	162	
Number of other visits (see separate list)*	4617	1349	5398	
Number of no access visits	12398	1490	11655	
Number of visits to persons 65 and over	909	1091	1537	
Number of visits re chiropody (excluding age 65 or over)	40	63	47	
	Total	95039	6334	95828

*Number of other visits:

Visits to child minders	792	4	469	
Visits to mentally disordered persons	240	2	288	
Visits to other discharges from hospital	132	5	255	
Other visits	3453	1338	4386	
	Total	4617	1349	5398

Number of school health service home visits: 2027 1674 1801

Attendances at clinics and other sessions		1967		1966
		H/V's	C/N/A's	
Child welfare centres		3578	2021	4765
Ante-natal clinics		.	177	107
School health sessions (inc. school clinics)		1183	2492	1473
Immunisation and vaccination clinics		14	139	102
Hospital sessions		588	11	567
Screening tests and audiology clinics		235	1	305
Parentcraft sessions		250	26	309
Mothercraft and health education sessions		100	26	158
Other sessions		2032	665	1710
Development clinics		67	.	118
	Total	8047	5558	9614

Staffing

At the end of the year out of approved establishment of 68 home nurses there were in post:

State Registered Nurses (17 part-time)	48
State Enrolled Nurses (5 part-time)	12
Auxiliaries (8 part-time)	9
Students	10
Total (including P/T)	79

Training

The Courses of Training for the Queen's Institute of District Nursing examination continued in Vaughan College. Two courses were held. Of the 17 students attending, four were sponsored by other Authorities, one was an independent student.

Developments in the Service—Senior Nurses

During 1967 a permitted establishment of 9 Senior District Nurses was approved. Seven of these were appointed in September. Each Senior Nurse supervises a group of approximately 6. They also supervise and teach the practical work to the Student District Nurses and arrange duty schedules of the group.

General Practitioner Group Attachment

One Divisional Nursing Officer reports:

After a study to assess the geographical spread of patients registered with doctors in three group practices, two groups of doctors were approached to discuss attachment.

In September one group of District Nurses headed by a Senior District Nurse was attached to two Group Practices.

1 Group of 6 Doctors

1 Group of 3 Doctors

This enabled the group system to be retained whilst still developing the concept of attachment.

The advantages are:

- (a) The SRNs make better use of their skills.
- (b) The nurses are much better informed concerning their patients.
- (c) This closer co-operation with the GP is resulting in a better service to the community.

Another report of the attachment in a second division:

In October 1967, a group of District Nurses, Health Visitors and Midwives, were attached to a group practice of four doctors who had already set up a group surgery, in a special building on Saffron Lane.

One particular District Nurse, with relief for holidays, attends the surgery sessions and gives treatment to patients. Health Visitors call in once or twice weekly to consult the Doctors on appropriate matters. A School/Clinic Nurse attends weekly for the immunisation of babies, and Midwives attend, on rota, the ante-natal sessions.

Liaison with Hospitals

The weekly visit to Hillcrest Hospital to discuss the needs of patients prior to discharge has been invaluable. Close follow-up does help to prevent a breakdown of the patient or family. The scheme for intermittent admission of old people into hospital for periods of six weeks has been much appreciated by relatives.

The weekly visit by the Assistant Divisional Nursing Officer to the Leicester Royal Infirmary to discuss the discharge of patients from the Orthopaedic wards has been of such benefit that it has now been established on a permanent basis.

Student Nurses Visits to Department

226 students from various hospitals spent one day visiting the district nursing service. This one day visit only allows for the initial awakening of interest, to be of permanent value a much longer period would of course be necessary, nevertheless both staff and students appreciate the contact. Results have shown that the staff on these occasions are often successful Recruiting Officers.

Summary of Nursing statistics

1967

Number of cases treated	Total	5999
Centre attendances		364
Day visits	5707	
Night visits	246	
Cases treated at G.P. Surgeries	606	
Total including those at G.P. Surgeries	6923	

Visits and treatments undertaken

	1967	1966	Difference from 1966
Day visits	165954	162971	+2983
Night visits	8426	8606	-180
G.P. Surgery (Treatments)	2194		
Total	176574	171577	+4997

Visits according to Nursing Centre

	1967	1966	1965	1964	1963
Central	51236	50917	57150	56638	60293
Belgrave	45071	47780	57258	55255	53385
West End	69647	67371	66804	68832	65062
Night	8426	8606	7009	3976	

Cases by age groups

			Under 1 year	1-4	Total under 5	5-14	15-64	65-74	75+	All ages	Total
Treated at Centre	<i>m</i>	2		5	7	10	137	17	8	179	
	<i>f</i>	.		3	3	4	142	22	14	185	364
Nursed by day	<i>m</i>	68		140	208	140	892	474	499	2213	
	<i>f</i>	21		46	67	60	1321	817	1229	3494	5707
Nursed at night	<i>m</i>	.		1	1	1	42	26	29	99	
	<i>f</i>	.		2	2	.	47	45	53	147	246
G. P. Surgeries					41					606	606

	Under 1 year	1-4	5-14	15-64	65-74	75+	
Total cases	<i>m</i>	70	145	151	1009	492	501
	<i>f</i>	21	49	64	1427	840	1230
Day visits	<i>m</i>	418	1166	1616	15097	15823	17432
	<i>f</i>	141	509	921	28919	33581	48137
G.P. Surgeries	All ages	—	2194				

Patients treated for 1 month and over

1 to under 3 mths	3 to under 6 mths	6 to under 9 mths	9 mths to under 1 year	1 year and over	Total
740	421	239	150	915	2465

Patients aged 65 or over

	1967	1966	1965	1964	1963
Number of male patients over 65	993*	1069	1017	1068	1086
Number of female patients over 65	2070†	2143	2140	2117	2133
Total	3063	3212	3157	3185	3219
Number of visits	114973	107524	117563	115207	115859
Patients nursed in bed, as a proportion of patients					
who are nursed in bed and ambulant	45%	42·94%	46·1%	45·8%	65·5%
Incontinent patients-urine	445	375	356	367	431
faeces	322	265	209	217	431

*Males 65-74=492; 75 and over=501

†Females 65-74=840; 75 and over=1230

Cases nursed for 12 months or more

	Total	915
Age groups	0-14 years	2
	15-64 years	179
	Over 65 years	734

Classification of diseases nursed for 12 months or more

	Cases	Visits	Needing more than one type of treatment
Cardiac	81	6005	15
Vascular	6	454	1
Pneumonia	1	46	.
Bronchitis	10	471	4
Other Respiratory	5	444	1
Tuberculosis	1	65	.
Cancer	41	5151	9
Other tumours	3	365	.
Diabetes	32	9300	8
Anaemia	312	8222	38
Alimentary	11	1281	5
Urinary	4	231	2
Generative organs			
male and female	52	1776	2
Diseases of breast	2	22	.
Infective skin diseases and other skin diseases	32	4738	3
Arthrosis	67	5524	10
Disease of bone	5	304	2
Cerebrovascular disease	71	8023	11
Other CNS disease	56	7157	9
Disease of ear	1	4	.
Disease of eye	7	1830	3
Infectious parasitic disease	3	374	1
Hernia	2	244	1
Varicose veins	12	1451	4
Senility	60	5403	5
Constipation	3	99	.
Home accidents	5	642	2
Other diseases	30	3032	8
Total	—	72658	

Cases nursed for 12 months or more

Patients needing one type of treatment	Visits
General nursing	25306
Insulin	6983
Other injections	15826
Post op. dressings and other dressings	9798
Vag. douche and/or pessary	416
Eye drops	604
Observations and other treatments	680
Total	59613

Patients needing more than one type of treatment, usually with multiple disabilities, e.g. General nursing and/or injections, dressings, etc.

General nursing and other treatments	Visits
Insulin	1837
Injections	1690
Eye drops	132
Art. eye cleaned	52
Dressings	1422
Vag. douche and/or pessary	150
Pacemaker changed	100
Total	13045

Medical Loan Equipment

Details of this service are given on Page 61.

Marie Curie Memorial Foundation

In 1967, 22 patients were helped by 3 nurses over a period of 386 hours, and a further 4 patients received material help. The total net cost to the Foundation was £127 4s. 10d.

Pupil Nurse Training

For the first time, five pupil nurses visited the Department for a period of two weeks, following their assessment at the Leicester Royal Infirmary. This development has in particular proved an interesting experience for those nurses entrusted with their practical supervision. A short course of lectures—discussions and practical work was arranged for them.

Night Nursing Service

During the year visits to patients at night in all areas of the City has continued. Staff changes, one way streets and traffic diversions added to transport difficulties has sometimes hampered but not once prevented the nurses attending the patients. The types of visits remain mainly the terminal cases and chronic sick. The pupil nurses from the Leicester Royal Infirmary attended one session on night duty to observe.

Centenary Celebrations

The completion of a hundred years of district nursing in Leicester 1867-1967 was celebrated on Wednesday, 12th April. A dinner was held at which the principal guest was the Lord Mayor of the City, Alderman Mrs. Monica Trotter. Many past members of the District Nursing Service were present including Officers of the Leicester District Nursing Association who organised the service as a delegated body until 1953.

On 1st November 1967 the Home Help Service attained its majority, the Service having been inaugurated on 1st November, 1946. The occasion was marked by the introduction of a new-style uniform, streamlined and stylish, with a neat air-hostess type hat, and a dinner was held, attended by the Deputy Lord Mayor, Alderman Mrs. M. Trotter, and Councillor N. Hanger, Chairman of the Health Committee.

Staff: Home Helps

Whilst recruitment of staff, generally speaking, was easier in 1967 than for some years past, the number of resignations continued to be high and considerable effort was required to maintain numbers at the 1966 level. It is therefore pleasing to report an increase of the equivalent of nine full-time home helps at 31st December, 1967 compared with the same date last year, although the total of 205 falls far short of the agreed establishment of 247 home helps. In order to achieve this net gain of nine, 169 applicants were interviewed, 68 accepted employment, and of these, 27 resigned during the year.

The table opposite sets out the total number of home helps on the pay-roll at 31st December, 1967 compared with the previous three years.

Total number of home helps on payroll, 31st December	1967	1966	1965	1964
i Full-time	91	103	82	85
ii Part-time (under 38 hours per week)	159	138	140	122
iii Full-time equivalent of ii	114	93	108	104
iv Total effective full-time staff	205	196	190	189
Total number of home helps	250	241	222	207
Auxiliary home helps	4	4	.	.

The movement of staff during the year compared with 1966, 1965 and 1964 was

	1967	1966	1965	1964
Trainees engaged	68	87	82	67
Home Helps re-engaged	15	12	18	9
Resignations and retirements	74	79	85	80

A major problem in the administration of the Service is the high rate of sickness amongst home helps. The nature of the work, and the conditions under which it is performed, put them at risk of infections of all kinds, back strain, accidents and other causes for disablement. The average number reporting sick each week is the equivalent of twenty full-time home helps.

Auxiliary Home Helps

Nine auxiliary home helps were employed during the year, to supplement help given to old or sick people at weekends and late evening. This 'good neighbour' scheme is proving a valuable extension of the work of the Service, particularly where householders may be at risk if left for very long without a visit.

The work of the Service during 1967

The table opposite shows requests for help which were met in the different categories of help required in the home, in accordance with Section 29 of the National Health Service Act, 1946.

In addition to the seven cases of night help included in the table, 22 other householders received night help but as they also received help during the day, they are included in 1 or 2 opposite. Such help is usually given in cases of terminal illness, or to allow relatives caring for old or sick people to obtain some relief during the night.

The figures show a slight decrease in the total number of homes helped compared with 1966. Help for maternity cases continued to fall, although the total number of bookings received was high. The help given both to cases of long and short term sickness dropped a little, but again there was an increase of 82 in the number of householders over 65 years helped.

	1967	1966	1965
¹ Aged 65 and over on first visit	2069	1987	1855
² Aged under 65			
a Chronic sick and tuberculosis	167	223	209
b Mentally disordered	23	21	27
c Maternity	135	168	155
d Others	209	210	193
e Night help only	7	8	10
Total	2610	2617	2449

Category	Cases brought forward from 1966	New cases 1967	New periods of help 1967	Total cases helped 1967	Cases completed 1967	Carried forward to 1968
Aged 65 or over on first visit	1370	592	107	2069	569	1500
Under 65 Chronic sick and tuberculosis	116	44	7	167	56	111
Mentally disordered	18	5	.	23	4	19
Maternity	5	130	.	135	132	3
Others	71	131	7	209	115	94
Night help only	.	7	.	7	7	.
Totals for 1967	1580	909	121	2610	883	1727
Totals for 1966	1470	1025	122	2617	1037	1580

Help for this group grows numerically and in depth, i.e. more and more elderly people need a greater amount of individual care. This can only be given by the staff at its present strength by cutting down help for other categories. Because people are living longer, help for the 75+ age group occupies a substantial part of the working time available, as is illustrated by the table opposite. 76 new cases were accepted for help of householders, over 75 years, living alone, during the period 1st September to 31st December 1967.

The growth in demand and need for help for the elderly serves to give ever greater emphasis to the point made in previous reports on the need for the installation of modern equipment providing warmth and cooking facilities. Some advance has been made under the Housing Improvement Grants scheme, but progress is slow. There needs to be a much more vigorous and positive approach to this problem, not only for the comfort of the elderly, but to lighten the load of heavy, dirty chores falling to the home help and releasing her for more purposeful work.

Householders living alone, receiving help at 31.12.67:

	Males	Females
65-74	60	279
75+	158	673

Week ended 17.3.67

488 daily calls=2440 during week

71 four-times weekly calls= 284

130 thrice-weekly calls= 390

323 twice-weekly calls= 646

664 once-weekly calls= 664

Total for week=4424

Week ended 27.10.67

472 daily calls=2360 during week

69 four-times weekly calls= 276

106 thrice-weekly calls= 318

275 twice-weekly calls= 550

679 once-weekly calls= 679

Total for week=4183

The number of visits made by the Organising staff was 14,073 compared with 13,479 in 1966.

For short periods in the winter months it was necessary to create a 'waiting list' for new applicants for help in Knighton, Stoneygate, Goodwood Estate and Clarendon Park, because of staff shortage. In addition to this, the weekly total of accepted cases not covered averaged 221 over the year. Some of these were away from home for various reasons, and many of the remainder were 'cleaning only calls' with a low priority, but they were all cases where need for the Service was established, but could not be met for lack of staff.

The 'Meals on Wheels' Service continued to allow more efficient programming of the home helps' time, but is still far short of the total required.

An Assistant Organiser has regularly attended the weekly sessions of the Hillcrest Geriatric Clinic and this collaboration with the nursing staff, patients and their relatives and the Geriatrician has contributed very much to the smoothness with which a patient is discharged from hospital.

The additional pool car provided for the service from 1st April 1967 enabled the Organising staff to deal more quickly with emergencies, and to give greater supervision to the staff. The total number of vehicles available for the service at 31.12.1967 was four, with a car allowance for the Deputy Organiser. It is still insufficient for a staff of nine, eight of whom are required constantly to be on the district. The payment of car allowance to all organising staff would seem to be the most appropriate and economic means to achieve a really mobile service.

Transport is also a problem for home helps in areas where public transport is thin, and cases are spread over a wide area. The home help with a bicycle is a great asset, but her numbers are dwindling. Very few buy bicycles for pleasure or personal use today, and it would be worth while for the Department seriously to consider having a 'pool' of these vehicles for the use of home helps. The capital

cost would be soon recovered in the time saved and energy released for productive work.

'Problem Families'

The group of home helps working under the guidance and supervision of the Deputy Organiser dropped from 18 to 16 during the year. Efforts are continually being made to recruit suitable women to this section of the service, but the emotional strain, coupled with the exacting physical nature of the work can prove too much for new recruits and they ask to work with old people.

The table on page 55 sets out the details of the work done in 1967.

The reduction in the number of families helped from 88 in 1966 to 85 in 1967 is accounted for by the reduction in staff.

The problems in these families are many, physical or

mental ill-health of parents, mis-management of income, low standards of diet, child-care and home management, arrears of rent and hire purchase commitments, together with other factors, place them at risk. A capacity for hard work plus qualities of patience, tolerance and understanding are needed by the home help to overcome difficult, frustrating situations. The Deputy Organiser visits regularly and works closely with other social work agencies involved with the families.

The support and guidance given varies in each case, but the value of the home help in such families teaching the mother budgeting, cooking, home management and child care cannot be over-estimated, hence the need to equip home helps to give the necessary guidance.

A general classification of the background against which supportive help is given is shown by the table below:

	Referred in 1967	Help continued from 1966
Mental health of mother	7	10
Physical health of mother	7	8
Unstable marital relationship	1	5
Mental instability of father	1	3
Inadequacy of parents	14	22
Behaviour problems in children	.	2
Death or desertion of mother, inadequacy of father	1	6
Death or desertion of father, inadequacy of mother	1	5

	Families	No. of children at home
Families helped in 1966 brought forward to 1967	61	318
New families referred to the service in 1967	18	100
New periods of help opened in 1967	6	36
Total number of families in the special category helped in 1967	85	454
Families where help was withdrawn in 1967	32	179
Families carried forward to 1968	53	275

The sources of referral of new families were:	Families	No. of children at home
Children's Department	2	12
Health Visitors	10	52
Family Service Unit	2	8
General Practitioners	2	18
Mental Health	1	3
Housing Welfare	1	7

and of new periods of help:	Families	No. of children at home
Children's Department	1	4
Health Visitors	3	15
General Practitioners	2	17

Help was withdrawn from 32 families during the year for the following reasons:	Families	No. of children at home
Families who remained stable and maintained reasonable standards over a period	4	26
Families who refused to co-operate	4	16
Father gave up job	5	30
Mother started to work	2	16
Improvement of physical and/or mental health of mother or father	9	51
Families left Leicester	1	5
Families where children were taken into care because of:—		
(a) Eviction of family	1	5
(b) Mother in hospital. Inadequacy of father	1	6
(c) Mother left home. Inadequacy of father	1	8
(d) Widowed mother admitted to hospital	1	2
Maternity help only for difficult families	3	14

The special scheme for providing help free of charge to certain families continued to play an important part in the work of the Service. These cases are frequently referred to the Service by other agencies caring for families at risk: their needs are investigated and admitted, but their financial circumstances make them liable to pay for help. In the interests of the children the need is usually urgent, but a demand for the completion of an assessment form may lead to a rejection of the services of the home help. Even where an assessment form is completed, the submission of an account would either lead to a refusal of help, the acceptance of inadequate help, or the accumulation of yet another debt. Each case was submitted to the Maternity, Nursing and General Welfare Sub-Committee of the Health Committee for approval.

Twenty-seven families involving 123 children received help free of charge under the scheme during 1967. There is little doubt that without this help and the flexibility given by the scheme, the majority of these families would have broken up and the children been received into the care of the Children's Department. The expenditure on this scheme may thus save the Corporation up to £1,700 a week.

The table below gives the statistical position of the work done under the scheme in 1967.

Special Scheme	No.	No. of children
Families helped under Special Scheme at 1st January 1967	26	127
Families admitted to Special Scheme during 1967	7	16
Families withdrawn from Special Scheme during 1967	6	20
Families helped under Special Scheme at 31st December 1967	27	123

The six families withdrawn from the Special Scheme received help as follows:

for 10 years	1 family
for 8 years	1 family
for under 1 year	4 families

Training of Staff

Organisers

The Deputy Organiser and one Assistant Organiser successfully completed the Certificate Course in Social Studies organised by the Extra Mural Department of Leicester University at Vaughan College, and one other Assistant Organiser continued her training in a further similar course. The Deputy Organiser commenced studying for the administrative course for Home Help Organisers sponsored by the Institute of Home Help Organisers. She also attended the Annual Week-end school organised by the Institute held at Scarborough from 28th to 30th September 1967.

Home Helps

Four home help preparation courses were held during the year. As has become established practice, trainees recruited for these training courses were supplemented by the engagement of suitable applicants outside the organised course. These were given initial intensive training by the Organiser, sent out on to the District under the supervision of an experienced home help, and later drafted into the next preparation course.

The courses were of six weeks' duration, arranged:— one-third in lectures, films and discussion periods given by the Organiser, medical staff, section heads and officers of other services directly involved in domiciliary care; one-third at the Central Institute under the guidance of a tutor in domestic subjects provided by the Education Department, where trainees prepare and cook meals, and are trained in the use of domestic equipment and household management, and one-third on the district with an experienced home help, selected for her ability to train, and supervised by the Assistant Organiser.

Compulsory removal

Court Orders under Section 47 of the National Assistance Act, 1948 were required in the case of four aged persons in dire straits for compulsory removal to hospital. These orders were essential because the physical and mental state of the patients made it impossible to continue to treat and maintain them in their own homes, yet led to their refusal to receive care elsewhere. All were over the age of seventy years.

Convalescence

Recuperative holidays were arranged during the year for 253 convalescent patients who were not in benefit with the Leicester and County Convalescent Homes Society, compared with 218 during the previous year. No doubt the increase in the number of applicants was partly the result of the better summer weather in 1967, and partly a delayed effect of the extension of the city boundary in 1966.

Applications were refused in four cases.

Of the total 253 patients sent away for recuperative holidays, 126 were elderly people who had passed retirement age.

Arrangements were made for 11 pulmonary tuberculosis patients to spend recuperative holidays at "Spero" Homes. In three of these cases the patient was accompanied by a relative whose expenses were partly paid by a grant from the T.B. Care Fund donated by the local branch of the British Medical Association for the purpose of assisting relatives of tuberculosis patients.

Patients going to Hunstanton Convalescent Home were again conveyed by the coach hired by this Department from a private coach company in Norfolk. This has proved to be a very satisfactory arrangement and the parking facilities in Leicester granted by the City Police were most helpful in running this transport service.

Convalescence	1966 figures in italics	
Number of applications	308	249
Children sent to a Roecliffe Manor	55	45
Adults sent to b Hunstanton	97	95
c Sheringham House and Overstrand Hall	88	62
d "Spero" and other homes	13	16
Not sent to convalescent home by Health Committee (Applications refused, refused to pay assessment, illness, other arrangements, etc.)	55	31

Patients were assessed on financial circumstances and in the majority of cases the full cost was borne by the Leicester Corporation, as shown in the following table.

No charge assessment i.e. full cost borne by Leicester Corporation	200
Part cost assessment	31
Full cost paid by patient, either by assessment or offer	22

The tables opposite and below give further details of the number of patients for whom recuperative holidays were arranged during 1967:

Distribution of patients according to age

Under 15	15-64	65-74	75-84	85 and over
56	84	73	39	1

Chiropody Service	1967	1966	1965	1964
New cases, domiciliary	274	223	243	285
Domiciliary treatments	4598	4078	3445	2879
New cases, other	317	281	188	195
Other treatments	4459	3740	2898	2332

Domiciliary Laundry Service	1968	1967	1966	1965	1964
Number of cases brought forward	85	79	86	99	94
New cases		260	229	290	240
Total		339	315	389	334

New cases, 1967

Referred by home nurses	247
by home helps	10
by others	.
by health visitors	3
Total	260

Result

Died	144
Hospital	76
Service no longer required	34

Of the new cases accepted the following conditions applied

Incontinent	246
No hot water supply	77
Living alone	62
Patients in receipt of Social Security Supplementary benefit	79
Two bags weekly	77
One bag weekly	143

Chiropody Service

During the year 52 applications were refused as the applicant's income in each of these cases was over the approved scale. At 31st December 1967, 1845 cases were receiving treatment.

Every applicant is visited by a Health Visitor or Clinic Nurse and the need for free service assessed, and revisited annually to assess the continuation of need.

Laundry Service

Leicester Old People's Welfare Association and the W.R.V.S., with Rotary Club support, continue to provide this invaluable service for elderly incontinent patients, although it is probable that many go without, not being aware of the facilities.

Medical Equipment loan

Mrs. Anne Crumbie, Assistant Branch Director, Medical Loan Section of the British Red Cross Society, to which this Local Authority has delegated the responsibility of organising and maintaining medical loan supplies, reports as follows:

"In order to keep pace with the ever increasing demands on our service, particularly for expensive appliances, it has been found necessary to increase the loan charges for the first time since 1960. We should like to stress, however, that in cases of hardship it is left to the discretion of the nurse to stipulate that no charge should be made. Also, if patients have had the equipment for a long period the article becomes theirs if they complete the purchase price

	1967	1966
Total number of patients:	3320	3230
Total number of loans:	4867	4558

The introduction of Ripple Beds is proving a very valuable aid in the care of terminal cancer patients.

Two recent additions to our range which we hope will prove useful, are a Balkan Beam Bed and a folding spinal carriage.

Once again we should like to thank the nurses for their close co-operation and understanding of our problems."

City Ambulance Service	Total calls	
Patients carried	1967	1966
Hospitals, etc.: Outpatients	85577	85127
Admissions and transfers	6940	9566
Discharges and convalescence	10134	8710
Maternity cases	2212	2057
Mental cases	121	55
Infectious diseases cases	81	84
Accident cases—road	1421	1418
—other	4440	2664
Premature baby cot cases	41	38
Patients dead on arrival	134	130
Other local authorities	28	45
Abortive calls	3120	2568
Miscellaneous services for which charges are made—number of journeys	11	13
Transporting gas and air machines for midwifery service—number of journeys	2362	2592
Number of other journeys made by personnel	809	738
Total calls	117431	115805
Mileage	454788	446155
Average miles per patient	3.81	3.853
Number of patients conveyed by train	75	134
Train mileage	8834	14173
Average train mileage per patient	117.78	105.8

Calls

There has been an increase of 552 abortive calls compared with last year. Whilst some of these were due to a mistake in the date or time of the appointment, etc., quite a large number were bogus calls both through the 999 system or by ordinary telephone lines. Some were of 'good intent' but there has been an increase in malicious calls received during the year. Both the Police and the G.P.O. have co-operated well in trying to catch the culprits, a large number of them being children during the holiday periods.

Two Tetanus patients were moved from Leicester Royal Infirmary to the special Tetanus Unit at Leeds Royal Infirmary during the year. Because of their serious condition both patients required the use of special equipment on the 100 mile journey and were accompanied by a doctor. The transfer was greatly facilitated by the co-operation of Leicester and Leeds Police who arranged to provide escorts.

Special Care Unit

During the year, a new 20 seater vehicle has been purchased for conveying children attending the Special Care Unit at the Emily Fortey School. A special type of harness and cots have been designed for this vehicle which up to the end of the year has proved very satisfactory.

	1967	1966	1965	1964	1963	1962	1948
Total number of calls	117,431	115,805	110,920	111,881	117,026	106,339	36,661
Mileage by road	454,788	446,155	398,699	391,236	397,024	387,893	196,870
Average miles per patient	3.81	3.853	3.594	3.497	3.39	3.65	5.37
Patients conveyed by train	75	134	201	209	232	289	.
Number of miles by train	8834	14,173	18,677	23,552	27,480	31,312	.
Average miles per patient by train	117.78	105.8	92.9	112.7	118.4	108.3	.

Re-housing on Medical Grounds

Re-housing on medical grounds Applications received during 1967

Applications referred by	Total Number	Number recommended by M O H	Number considered by Housing Committee	Number approved by Housing Committee	Medical reasons	Number deferred
General Practitioners	—				1 Respiratory	2
Housing Department	—				Bronchitis	35
Unsupported applications	—				T B	11
Health Visitors	—				2 C V S	7
	245	32	30	23	3 C N S	
					Diseases	12
Members of Council	—				Mental illness	15
Mental Health Department	—				4 Wounds	
Social Workers	—				Amputations	
					Arthritis	
					Disabled	
					5 Miscellaneous	26
					Cardiac	62
						13

Deaths

There was a reduction in both male and female deaths in 1967. It is perhaps surprising to note that nearly as many people died violent deaths (154) that is as a result of road traffic accidents, other accidents or suicide, as died from bronchitis (163). These two conditions each account for approximately 5% of the total deaths.

Over one third of the road traffic deaths occurred in the elderly.

Cardiovascular disease still remains the largest single killer accounting for 1,179 deaths, 35%.

Cancer accounted for 20% of the deaths (658 people) 155 of these were men dying of cancer of lung, an increase of 16% over last year's figures.

Winter deaths

Although the winter of 1967/68 was not particularly cold the deaths occurring amongst those over 60 in November and December were 12% and 22% above the average for the last 8 years.

Road deaths

From local statistics it is seen that if riding as a pillion passenger or driving a scooter when involved in an accident there is a 1 in 50 chance it will be fatal. If not fatal then the chances that the accident will be serious are as high as 1 in 7.

Christmas Road Accidents

1964/65	1965/66	1966/67	1967/68
65	82	102	100

Examination of the Road Traffic Accidents occurring in the three week period before, during, and after Christmas from 1964/65 to 1967/68 shows that there has been a substantial rise in accidents until 1967/68. Whether the slight reduction in accidents for Christmas 1967/68 is due to the new legislation against drunken driving will be confirmed after more prolonged study.

Cervical cytology

The cytology report indicated—

No abnormal cells	453
Doubtful	4
Positive	10
Trichomonas	60
Monilia	4
Other findings	451

Further analysis according to the number of children the patient had indicated.

No children	11%
1 child	17%
2 children	40%
3 children	18%

The highest incidence of positive findings was amongst those with two or three children.

Analysis of the geographical distribution of patients indicated that the majority came from areas in which the population was predominantly of Social Class I and II. It was significant, however, that in one of the poor areas there was the highest incidence of cancer.

These findings emphasise the need for more selective screening and it is hoped to introduce a domiciliary service as soon as possible which will concentrate particularly on high risk groups in selected areas. At present only 3% of those women between the age of 25-60 who are particularly at risk have taken advantage of the facilities offered. The remainder must be considered to be exposing themselves unnecessarily to danger, as according to a recent World Health Organization Report, three-quarters of all cases of cancer of cervix could be prevented if caught early enough.

Immigrants

The number of immigrants entering the City during the last few years has been considerable. Although the majority of these are living in fairly localised areas of the City, the heavy demands made upon services by this section of the population far exceed their proportional representation. It is difficult to obtain an accurate enumeration of the number of immigrants in the City, but based on the assumption that there is a direct relationship between the proportion of the indigenous and immigrant population in schools and the total population, then as a minimum estimate the percentage of immigrants in the City has increased from 6% in 1966 to over 9% at the commencement of 1968. It is probable that during 1967/68 the number of immigrants in the City was over 25,000. There was a very marked increase towards the end of the year.

Infectious Hepatitis

There was a slight rise in the number of cases notified; this was disappointing since it reversed the downward trend of the last few years. The department continued to collaborate with the Central Public Health Laboratory research project into the efficacy of Gamma Globulin in reducing the spread of infectious hepatitis.

Infectious diseases morbidity and mortality

	Notifications	Deaths	
Measles	2264	2991	.
Scarlet fever	122	58	.
Whooping cough	131	67	.
Diphtheria	.	.	.
Meningitis	2	3	.
Acute poliomyelitis	.	.	.
Encephalitis (infective)	.	2	1
Typhoid fever	1	2	.
Paratyphoid fever	.	.	.
Infective hepatitis	208	181	.

1966 figures in italics.

Dysentery

Six cases of dysentery were confirmed bacteriologically in 1967. Of the total number 5 were cases notified by General Practitioners, the other being ascertained by other means.

In addition to the confirmed cases of dysentery and food poisoning, 175 other cases of gastro-enteritis were investigated.

Food Poisoning

One outbreak of food poisoning occurred during the year, affecting at least 15 of the 50 or so people who ate a particular meal in a staff canteen. None was seriously affected. A specimen of the meat served at the meal was heavily contaminated with bacteria, though no organisms specifically associated with food poisoning were found. Nevertheless it seems probable that the meat was the cause of the outbreak. Enquiries showed that this meat (roast lamb) had been cooked three days before the meal in question, had been kept in a food store overnight before being transferred to a refrigerator, and had finally been re-heated before being served. The kitchen was scrupulously clean but the incident illustrates the hazards of pre-cooked food, particularly when it is allowed to cool down slowly—conditions ideal for the growth of bacteria.

Typhoid Fever

The one case of typhoid notified during the year was an 8-year old girl who had recently arrived in this country. Investigation indicated that she had contracted the disease whilst abroad and there were no secondary cases.

Paratyphoid Fever

One member (not a City resident) of a party of 22 schoolboys visiting Spain became seriously ill with paratyphoid soon after his return from the holiday. Detailed follow-up of the other members of the party did not reveal any other cases of paratyphoid, though several of the boys did show evidence of other gastro-intestinal infection, some of which proved serious. There is no doubt that overseas travel, particularly in countries where the general level of Public health and food hygiene is not as high as in this country, carries the risk of contracting infectious diseases and travellers should whenever possible be protected by immunisation. Extreme care in eating and drinking habits whilst overseas is also essential.

Food poisoning 1967

	General outbreaks		Family outbreaks		Sporadic cases		Total No. of outbreaks (columns 1, 3, 5)	Total No. of cases (columns 2, 4, 5)
	No. of separate outbreaks	No. of cases notified or ascertained	No. of separate outbreaks	No. of cases notified or ascertained	Notified or ascertained	No. of outbreaks and sporadic cases		
Causative agent	1	2	3	4	5	6	7	
<i>S. typhimurium</i>	.	.	.	.	.	.	.	.
Other <i>Salmonellae</i> (a)	.	.	1	2	5	6	6	7
<i>Cl. welchii</i>	.	.	.	.	.	.	.	.
<i>Staph. aureus</i>	.	.	.	.	.	.	.	.
Other causes (b)	.	.	.	.	.	.	.	.
Cause unknown	1	15	.	.	.	1	1	15
Total	1	15	1	2	5	7	7	22

Tuberculosis

Report on the Chest Clinic for 1967
by C M Connolly, *MD, MRCP, DPH*

The tuberculosis work of the Chest Clinic continued along the same lines as in the previous year.

The incidence of the disease in the Asian immigrants has remained high and for the first time the number of new cases in Asians exceeded the number found in the white population of the City.

Some problems still arise with the immigrants mainly because of language difficulties, but they have generally been very co-operative in accepting treatment and the other control measures that are necessary to prevent the spread of infection.

The number of chronic positive cases has continued to decline and has now reached a very low figure. This is very satisfactory to record as the number of chronic positive cases is a useful index of the success or otherwise of our methods of treatment.

It would be foolish to think that we have yet solved the problem of tuberculosis in the City and steady unremitting efforts will be required for many years to come.

New Cases

158 new cases of tuberculosis were registered during the year as compared with 212 in 1966. These figures include cases previously notified elsewhere (transfer in) who came to live in the City during the year. The pulmonary cases decreased by 61 and the non-pulmonary cases increased by 7. These new figures are analysed in the tables that follow.

The number of new cases in Asians was 50 pulmonary and 29 non-pulmonary cases in 1967 as against 42 and 14 non-pulmonary cases in 1966.

The pulmonary cases in Asians (50) accounted for 55.5% of the total of new pulmonary cases in the City and the non-pulmonary cases (29) accounted for 70.7% of the total non-pulmonary cases found during the year.

The number of new cases in Asians since 1964

	1967	1966	1965	1964
Pulmonary	50	42	39	29
Non-Pulmonary	29	14	13	15
Total	79	56	52	44

New cases including 'transfers in' since 1964

	1967	1966	1965	1964
Pulmonary	114	175	165	146
Non-pulmonary	44	37	28	43
Total	158	212	193	189

Sources of the cases of tuberculosis registered in 1967

	Pulmonary	Non-pulmonary	Total	
Transferred in from other areas	24	3	27	
Referred by General Practitioners	44	25	69	
Referred by Hospital Doctors	11	16	27	
Referred by Mass Radiography Unit	11	.	11	
Discovered on Contact X-ray	15	.	15	
Scheme for X-ray of pregnant women	3	.	3	
School case finding scheme	4	.	4	
Death adjustments	2	.	2	
Total	114	44	158	

Sex and age groups of those notified during 1967

	0-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-64	65+	Total
Pulmonary males	1	2	2	3	8	15	7	5	8	3	54
females	3	3	4	2	8	7	5	1	1	2	36
Non-pulmonary males	1	1	.	2	6	4	3	3	.	.	20
females	1	1	2	3	2	3	4	4	.	1	21

Sex and age groups of those transferred in from other areas and 'lost sight of' cases returned

	0-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-64	65+	Total
Pulmonary males	1	.	.	1	.	5	5	5	3	.	20
females	.	.	.	.	1	3	.	.	.	.	4
Non-pulmonary males	.	.	.	.	.	1	.	.	.	.	1
females	.	.	.	1	.	1	.	.	.	.	2

Contacts	1967	1966	1965	1964
Number of contacts examined	1645	1599	1983	1425
No. of contacts found to have tuberculosis	15	13	21	9

This table shows the number of contacts who attended for Chest X-ray during the past four years. The number of contacts found to have tuberculosis in 1967 was 15 as compared with 13 in 1966.

School case-finding scheme	1967	1966	1965	1964
Tuberculin positive school-children and their contacts, including school entrants immigrants and the school leavers	670	390	405	78
Number found to have tuberculosis	4	5	17	.

	1967	1966	1965	1964
Number of expectant mothers X-rayed	1921	2183	2090	1915
Number found to have tuberculosis	3	3	2	3

B C G Vaccination	1967	1966	1965	1964
Number of B C G vaccinations	724	620	461	526

Deaths	
Deaths due to pulmonary tuberculosis	10
Deaths due to non-pulmonary tuberculosis	1

Number of deaths from tuberculosis in Leicester during the past four years	Phthisis		Other tuberculous diseases		Total tuberculous deaths	
	Deaths	Rate per 100,000 population	Deaths	Rate per 100,000 population	Deaths	Rate per 100,000 population
	1967 10	3.53	3	1.06	13	4.6
	1966 13	4.65	1	0.35	14	5
	1965 13	4.8	2	0.8	15	5.6
	1964 21	7.8	2	0.7	23	8.6

The above figures for 1967 include 3 death adjustments, 2 recovered cases of tuberculosis and 2 non-pulmonary cases of which there is no knowledge.

Analysis of deaths Pulmonary cases on Chest Clinic Register

Stage when first examined	Died within one month of notification	Within three months	Within six months	Within twelve months	Within two years	Within three years	Within five years	Over five years	Total
TB-ve cases
TB+ve stage 1
TB+ve stage 2	1	.	.	1	2
TB+ve stage 3	2	.	.	1	3
Total	3	.	.	2	5

Chronic cases	1967	1966	1965	1964
Number of resistant cases	4	6	6	13

Recovered cases

During the year the names of 109 patients were removed from the tuberculosis register as having recovered. Of these 91 were pulmonary and 18 non-pulmonary. Of the pulmonary cases 49 had had tubercle bacilli in their sputum.

Clinical examinations	Men	Women	Children	Total
First examinations	2666	1881	368	4915
Re-examinations	1997	933	318	3148
Radiological examinations	1967	1966	1965	1964
	14042	14135	14888	14216

Radiological examinations

General Practitioners in Leicester requested an opinion on 4099 patients, 2948 were referred for the first time and the remainder were cases who had been before.

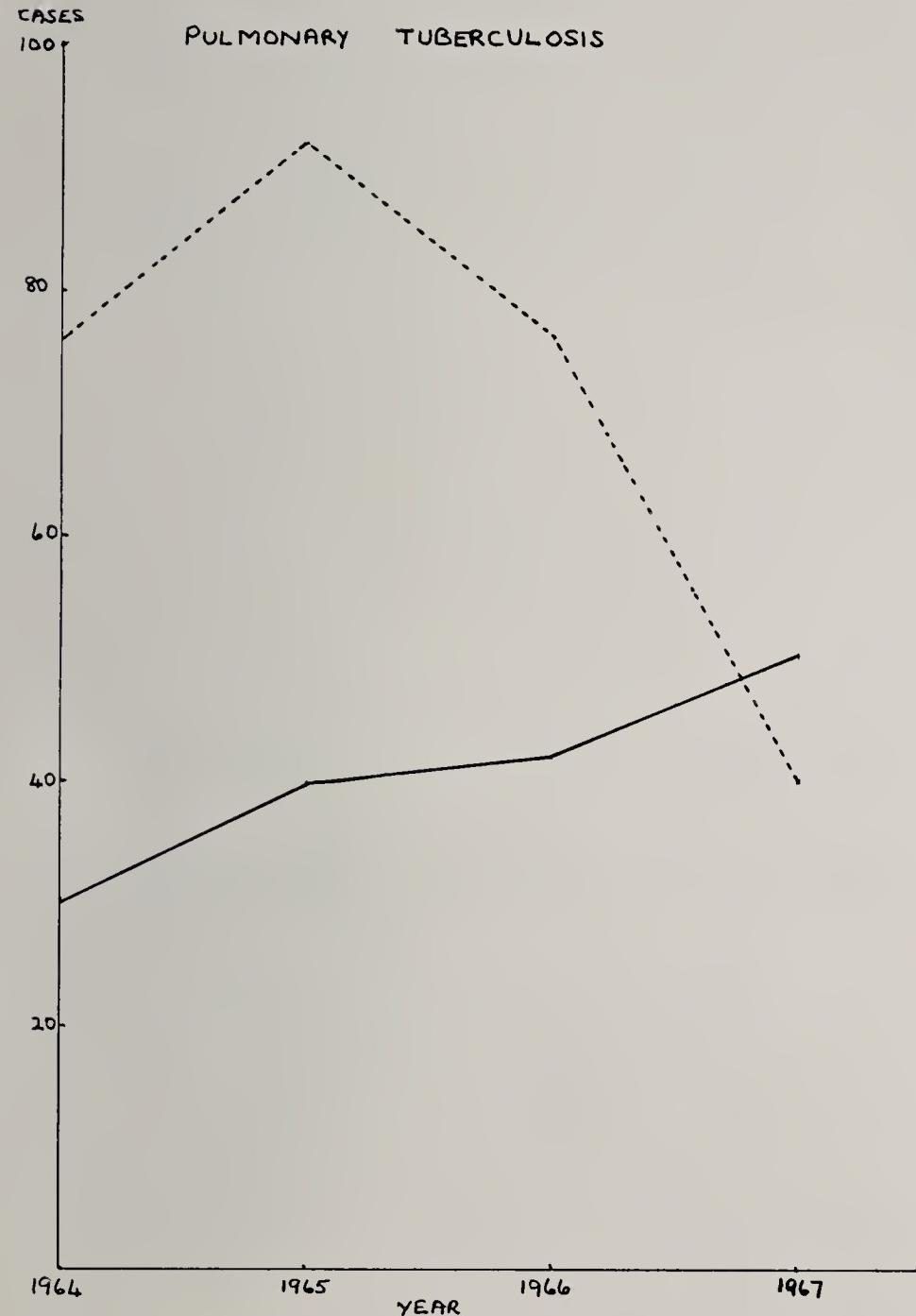
Analysis of cases on Chest Clinic register

	Diagnosis	Pulmonary			Non-pulmonary			Total			Grand Totals
		Men	Women	Children	Men	Women	Children	Men	Women	Children	
A New cases examined clinically and/or radiologically	Definitely TB	39	22	5	15	15	3	54	37	8	99
	Diagnosis not completed and under observation	.	.	.	.	.	.	205	87	72	364
	Non-tuberculous	.	.	.	.	.	.	2804	3623	296	6723
B New contacts examined during the year	Definitely TB	2	5	8	.	.	.	2	5	8	15
	Diagnosis not completed	.	.	.	.	.	.	3	6	2	11
	Non-tuberculous	.	.	.	.	.	.	361	269	189	819
C Cases written off Chest Clinic Register	Recovered	47	36	8	5	11	2	52	47	10	109
	Non-tuberculous	.	.	.	.	.	.	3337	3939	526	7802
D Number of cases on clinic register as at 31st December 1967	Definitely TB	542	307	68	77	90	13	619	397	81	1097
	Diagnosis not completed and under observation	.	.	.	.	.	.	422	205	105	732

1 Number of cases on Clinic Register on 1st January 1967, including observation cases	1757
2 Number of cases transferred in from other areas, also "lost sight of" cases returned	26
3 Number of cases transferred to other areas, cases not desiring further assistance under the scheme, cases "lost sight of" and cases where the diag- nosis has not been established	51
4 Cases written off during the year as dead (all causes)	23
5 Number of attendances at the Clinic for all pur- poses	16695
6 Number of chest X-ray films taken during the year	14042
7 Number of persons receiving B C G Vaccine at the Clinic during the year.	724
8 Number X-rayed under the scheme for X-ray of pregnant women	1606
9 Number of patients to whom free milk was granted by the Local Health Department	84
10 Number of patients to whom beds and/or bedding have been loaned by the Local Authority	4

TUBERCULOSIS - NEW NOTIFICATIONS

IMMIGRANTS —
OTHERS -----



IMMIGRANTS —
OTHERS -----



Leicester Area Mass Radiography Unit—Report for 1967

I am indebted to Dr. E. M. Quinn, Medical Director, for the following report:

"As in previous years, the Unit divided its time between the City and the County Districts.

The groups X-rayed consisted of the general public; organised groups; doctors' referrals; students; Schools' staff; tuberculin skin positive school children; contacts and prisoners.

Visits were made by the Unit to Messrs. Jones & Shipman; the Metal Box Co.; the Leicester University; Messrs. Wadkins; H.M. Prison, and two large industrial surveys were undertaken in the Abbey Lane and Evington Valley areas.

24,785 persons were X-rayed during the year (23,493 in 1966)

14 cases (22 in 1966) of pulmonary tuberculosis requiring close supervision were discovered—8 males and 6 females, of these 8 were Asian immigrants, giving the rate of 0·56 per 1,000.

663 examinations were referred by General Practitioners (762 in 1966). Two cases of pulmonary tuberculosis requiring close supervision were found in this group.

25 cases of malignant neoplasm were found—23 males and 2 females (18 cases in 1966). 11 cases were found from doctors' referrals; 4 from public sessions and 10 from the organised groups."

Leicester City, 1967

	Initial X-ray				T B Close super- vision		Rate per 1000	T B Occasional super- vision		Bronchi- ectasis		Cardiac		Pneumo- coniosis		Non- malignant neoplasm				Malignant neoplasm		Sarcoid	
	m	f	Total	m	f	m	f	m	f	m	f	m	f	m	f	m	f	m	f	m	f	m	f
Group																							
Public sessions	3147	2924	6071	3	1	0·66		1	.	3	1	6	5	.	.	4	.	1	.	.	1	.	1
Doctors' patients	387	276	663	1	1	3·01		.	.	2	.	11	3	.	.	10	1	.	.	1	.	.	1
Organised groups	9674	5974	15648	4	3	0·45		1	1	4	1	18	2	1	.	9	1	.	.	4	.	4	.
Students	814	711	1525	.	.	.		.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Prisons	177	.	177	.	.	.		.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Schools																							
Outward Bound	9	6	15	.	.	.		.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Skin+ve	55	29	84	.	1	10·1		.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Mental patients	296	303	599	.	.	.		1	.	1	2	1	3	1	.	.	.	.	.	.	.	.	.
Ante-natal	1	2	3	.	.	.		.	.	.	.	.	.	.	.	.	.	.	.	.	.	.	.
Total	14560	10225	24785	8	6	0·56		2	2	10	4	36	13	2	.	23	2	1	.	5	1	.	

Venereal Disease

I am indebted to the Physicians in charge of the Treatment Centre for the following table of cases.

Incidence of venereal disease and allied conditions in 1967

		New cases during 1967	Teenage groups included in new cases	
			under 16	16-19 yrs (incl.)
<i>Syphilis</i>	<i>m</i>	13	.	.
	<i>f</i>	9	.	.
<i>Gonorrhoea Local</i>	<i>m</i>	57	.	10
<i>Immigrant</i>	<i>m</i>	124	.	2
<i>Local</i>	<i>f</i>	89	1	21
<i>Immigrant</i>	<i>f</i>	21	.	.
<i>Total</i>	<i>m</i>	181	.	12
	<i>f</i>	110	1	21
<i>Other conditions</i>	<i>m</i>	532		
	<i>f</i>	369		
<i>Totals</i>	<i>m</i>	726		
	<i>f</i>	488		
<i>Grand total</i>		1214		

Vaccination and Immunisation

Scheme of immunisation adopted by Leicester Health Department and School Health Service.

Age	Visit	Procedure	Interval
3 months approx.	1	Diphtheria/Tetanus/ Whooping cough and Oral polio	4-6 wks
4 "	2	As above	"
5 "	3	As above	"
15 "	4	Smallpox vaccination	
18 "	5	Diphtheria/Tetanus/ Whooping cough and Oral polio	
5 years approx (school entry)		Oral polio and Diphtheria/Tetanus	
10 years approx.	7	Diphtheria/Tetanus	
13 "	8	B C G	

Oral polio is now given as a 4th dose at the age of 18 months, and a 5th dose at school entry.

Table X Children born in 1966

	Whooping cough	Diphtheria	Polio- myelitis	Smallpox (Children under 2)
	(1)	(2)	(3)	(4)
England and Wales	74	75	71	39
Leicester	68	68	68	35

Table X shows the percentages vaccinated together with the equivalent national figures.

The figures in columns (1)-(3) are calculated to show the percentage of children born in 1966 who have been vaccinated at any time. Column 4 includes only children who were vaccinated during 1967 and were under 2 years old at the time, and is calculated as a percentage of children born during 1966. This is considered to give a reasonable estimate of the children being vaccinated against smallpox.

Diphtheria immunisation

(a) Primary immunisation

Table 1

Year of immunisation
and numbers immunised

Year of birth	1967	1966	1965	1964	1963
1967	1769				
1966	2097	1415			
1965	296	1992	1356		
1964	98	383	1942	1467	
1963	63	118	246	1782	1512
Total completed primary courses by 31.12.67			16536		

(b) Reinforcing doses

(i) at age 18 months

Table 2

No. receiving 4th dose of diphtheria/pertussis/tetanus in 1967	At GP surgery	Born 1966	Born 1965	Total
	227	462	689	
	at LA clinic	580	1216	1796
	Total	807	1678	2485

Table 3

Year of immunisation

1967	1966	1965	Total
Number immunised	1722	665	2387

(ii) at school entry

Table 4

Number of school entrants completing primary course against diphtheria in 1967	474
Number of school entrants receiving booster doses in 1967	2272
Total	2746

(iii) at age 10 years approx.

Table 5

Number of junior school children completing primary course against diphtheria in 1967	1351
Number of junior school children receiving booster doses in 1967	2182
Total	3533

Whooping cough vaccination

Table 6 Number of children receiving whooping cough vaccination in 1967, 0-5 years

	At Local Authority Clinic	At GP surgery	Total
Completing course of primary vaccination	3062	1171	4233
Receiving booster dose	2079	761	2840

Tetanus immunisation

Table 7

Number of children up to age 16 years receiving tetanus vaccination in 1967

Completing course of primary vaccination	7472
Receiving booster dose	7000

Smallpox vaccination

Table 8

Number of persons vaccinated against smallpox in 1967

	Under 1 yr	1 yr and under 2 yrs	2-4 yrs	5-14 yrs	Total	By Health Dept. Staff	By GP's	Total
Primary vaccination	52	1766	416	195	2429	1686	743	2429
Re-vaccination	6	56	46	175	283	151	132	283

Infant vaccination

Table 9

	1	2	3
	Number of children vaccinated during year at recommended age	Live births in same year	% of live births
1967	1822	5230	34.8
1966	1559	5095	30.6
1965	1457	4963	29.3
1964	1038	5047	20.6
1963	324	4967	6.5
1962	1937	5032	38.5
1961	424	4647	9.1
1960	410	4488	9.2
1959	412	4493	9.2
1958	288	4469	6.4
1957	367	4396	8.3

Poliomyelitis vaccination

Table 10 *Number of injections given in 1967*

	0-4 yrs	5-9 yrs	10-15 yrs	By LA Staff	By GP's	Total
Primary dose (i.e. Primary course completed)	14	.	.	.	14	14
Fourth dose (i.e. Booster dose)	4	.	.	.	4	4

Table 11 *Number of doses of oral vaccine*

	0-4 yrs	5-9 yrs	10-15 yrs	By LA Staff	By GP's	Total
Third dose (i.e. Primary course completed)	4310	524	151	3782	1203	4985
Fourth dose (i.e. Booster dose)	1991	2166	1725	5173	709	5882

Tuberculosis . B C G vaccinations

Table 12 B C G vaccination of 13 year old pupils in 1967

Number of pupils tested	3488
Number of pupils who attended for reading	3313
Number of pupils found to be negative	2749 = 90.39%
Number of pupils found to be positive	266 = 9.61%
Number of pupils found to be positive, previously vaccinated	298 = 8.99%
Number of pupils vaccinated	2657
Number of pupils found to be negative not vaccinated due to eczema or other conditions	27

Table 13 B C G vaccination of immigrant pupils

Number of pupils tested	1410
Number of pupils who attended for reading	1318
Number of pupils found to be negative	785 = 71.89%
Number of pupils found to be positive	307 = 28.11%
Number of pupils found to be positive, previously vaccinated	226 = 17.15%
Number of pupils vaccinated	771
Number of pupils found to be negative, not vaccinated	15

Table 14 Post B C G vaccination skin tests

Number of pupils retested (Pupils found to have no, or very small reaction on inspection following vaccination)	240
Number of pupils found to be positive	131 = 59.82%
Number of pupils found to be negative	88 = 40.18%
Absentees from reading	21
Number of pupils found to be negative, but not re-vaccinated	14
Number of pupils re-vaccinated	75

Yellow fever vaccinations

Number of vaccinations, 1967 517

Health education

The appointment of an assistant health education adviser and a full time clerk has enabled us to maintain a steady programme of work and to plan new schemes. The personal one-to-one health teaching of doctors, health visitors, district nurses and midwives in homes and clinics, and also of the public health inspectors in the environmental field has been fully supported by more health education methods. Such work forms the bulk of the health education in any health department. Its success cannot be measured by such yardsticks as how often, how much, how many. The value of these day to day efforts is both direct and indirect and pays dividends that are enormous over the years. The following is a report of group health education by lessons, lectures, discussions and demonstrations and of our attempts to influence individuals to choose behaviour that will keep them well and happy and to enable them to make full use of the services that help them to put what they learn into practice.

Planning programmes

No short cuts have been taken in thorough planning and preparation of staff for group teaching, as information concerning the nature and location of problems where health teaching is needed becomes available. Because of this advances must necessarily be slow. In addition, people nowadays are accustomed to the most sophisticated presentation on television and in the schools, and they are not likely to learn from amateur teaching. Therefore sufficient modern teaching aids are being acquired and new techniques learned and used.

Adoptive Mothers

Opportunities for preparatory teaching to women awaiting an adopted baby have long been overdue. Plans to offer these classes were made with the secretaries of the local

Adoption Societies. A course is now held every two or three months. More than twenty adoptive mothers have attended each course.

Ante-natal classes

The teaching of expectant mothers is given high priority in the health education programme. Six courses run consecutively, and the mothers attend for six weeks. Specially trained health visitors and midwives teach mothercraft and the physical and psychological preparation for labour. Group teaching at this time is of unusual importance, for the mothers need to have a sense of belonging, of pride in pregnancy, to learn with and from each other, to take pregnancy and labour seriously but not fearfully, and to look forward confidently to caring for the baby. A permissive atmosphere encourages conversation and often reveals a startling ignorance of much that we take for granted the modern girl will know. One evening session during the course is held for the benefit of husbands and wives together. Advice on family planning is now part of the course. Four hundred and twenty one women attended during the year, but not all of those who applied took up the invitation to attend.

Child Health Clinics

Group teaching to augment personal teaching by the doctors and health visitors at the child health clinics is increasing. It is now a regular feature at four clinics. Plans are being made with the health visitors concerned to start at twelve more clinics. Since there are no absolutes in mother and child care, the education is broad and flexible, planned according to the wishes of the health visitor concerned with the area and making maximum use of modern techniques and teaching aids. Special resourcefulness is needed in group health education to the Asian mothers to overcome the difficulties caused by language barrier and cultural differences. Group teaching by means of demon-

strations, slides and films are a regular feature at the three child health clinics most concerned with the Asian mothers. Leaflets on family planning and child care have been made in the Hindi, Urdu, Gujarati and Punjabi dialects.

Cytology Clinics

A team of health visitors has undertaken teaching to lead to early detection of breast cancer. Instruction (helped by a one minute film) on regular self-examination of the breasts as a sensible precaution, is given to all women as they leave after the cervical smear test.

Schools

Teaching child care, personal and environmental health and information on the work of the social services by members of the health department staff has increased. Although we cannot at present meet all requests, some classroom teaching is now done by health staff in the bulk of the secondary modern schools in the city. The teaching, mainly to fourth year girls (and boys) consists of courses lasting for the three school terms, or for one term, or for six weeks. Single lessons are given in some schools.

We are grateful for the tremendous help and interest of head teachers and school staff and again it must be mentioned that our classroom teaching is in addition to health education done by school staff throughout the curriculum and by school nurses and doctors who take opportunities for health teaching when they see the boys and girls individually.

Miscellaneous Health Education

Participation in the training programmes of student district nurses, student health visitors, hospital student nurses, student teachers, youth leaders and home help trainees has continued. Some of the evening teaching to outside organisations has again been curtailed, until more teachers become available. Monthly in-service education to all health staff by film and discussion has included mental health, family planning, infertility, child care, racial integration, drug addiction. A number of staff have participated in various radio programmes aimed at bringing to the attention of the public various health hazards and a local community magazine has also provided a medium for health education.

Public Health and Food Inspection Department

Report for the year 1967

G A Hiller, *FRSH, FAPHI*, Chief Public Health Inspector



Public Health Inspector calls to make an inspection of the house

Paul Stokes, Photographer.

During the year 1967 quiet but steady progress was made in most fields of our work.

Multi-occupation of dwelling houses is still on the increase and whilst measures taken to prevent the spread of this way of living have been quite effective there is no doubt that in the main area, Highfields and North Evington there has been a marked intensification. This is not surprising as the increased entry of immigrants is centred on this area.

The work of improving those houses short of modern amenities is slowly gaining impetus and more tenants are co-operating. Individual applications from tenants outside of compulsory improvement are also increasing. It is hoped that the measures proposed in the White Paper "Old Houses into New Homes" will do much to accelerate this work, bring about a better attitude of mind amongst house owners to repair and maintenance and do something to raise the standard by which houses are judged to be fit for habitation.

Additional staff appointments have made it possible to give more satisfactory attention to food hygiene and all the premises involved are now receiving much better attention although it is still not possible to visit restaurant kitchens, hotels and cafes as frequently as was planned in the Organisation and Methods Review of 1961. This is largely due to the sharp increase in the number of food preparation premises in the city.

Meat inspection is a highly specialised and vital part of the services rendered to the community by those members of my staff engaged in this work. Every single carcase of meat killed and dressed for human consumption in this city receives a full examination. There is excellent co-operation with the Veterinary Officers of the Ministry of Agriculture, Fisheries and Food and valuable help is given from time to time by Dr. N. S. Mair and his staff of the Public Health Laboratory Service.

A particularly interesting case of listeriosis is mentioned in the text of the report.

If the demands now being made on our time for educational talks continue to increase special consideration will have to be given to see how best they can be satisfied.

Mr. Harry Clough my Deputy since October, 1953 and Miss Eileen Battle, Chief Clerk, retired at the beginning of January, 1968, after 37 and 44 years service respectively. Both served the Department, and me, particularly well, and I wish to record here my deep appreciation of their work and extend to them my best wishes in their retirement.

Similarly I must thank all my staff, technical, clerical and manual for a good year's work. Dr. Moss continues to give us all that encouragement which from time to time is most acceptable especially when our duties force us to require people to do things which go against the grain. We are grateful to him.

Finally I would like to express the hope that generally speaking our relationship with all in this City is typified by the photograph fronting my Report.

Living conditions

Houses in disrepair

The number of complaints of defective and unsanitary conditions in dwelling houses continues to be high despite steady progress in the demolition of unfit houses in slum clearance areas and the continued changeover from tenant to owner occupation.

The basic reason for this can only be the fact that property repairs are so very expensive and thus are very high in proportion to the gross income derived from house ownership. This has been recognised in the White Paper "Old Houses into New Homes" issued by the Ministry of Housing and Local Government in April, 1968.

The powers exercised by local authorities cover only defective conditions and do not allow of any preventive action. For example, in the case of penetrating dampness proper treatment at an early stage would not only prevent offensive conditions arising but would be cheaper in actual

cost as well as saving the cost of possible renewal of plaster and decorations on the inside surfaces.

Compulsory improvement of houses

The rate at which houses are being improved is slowly increasing as was expected as the visitation by officers of the local authority and receipt of statutory notices by tenants as well as landlords inevitably excites discussion between neighbours. Quite a number of tenants who refused originally to consent to improvements being carried out have since changed their minds and similarly more recently declared areas of compulsory improvement contain a greater proportion of co-operative tenants.

During the year 770 houses were surveyed in declared areas and 74 individual applications from tenants were dealt with.

Rent Act

This Act continues to be little used by tenants as it is so very slow in action particularly where an owner has given an undertaking to do the repair demanded. In such a case a period of six months has to expire before there is any reduction in rent payable as it is expected that an undertaking will be honoured in this time.

Unfit houses—clearance areas

During the year 8 clearance areas were reported involving 239 houses and 5 other buildings. This was not in accordance with the declared programme of dealing with 600 houses each year, but the year 1968 should see the balance restored.

Multiple Occupation

It is pleasing to report that multi-occupation is now being dealt with on a house to house survey basis. Statutory notices covering management, provision of amenities and fire escapes as well as directions for the prevention or

reduction of overcrowding were served in respect of 229 houses.

All prospective purchasers of houses likely to be turned into units of multi-occupation are made aware of their responsibilities in the matter when official enquiry is made through the Land Charges system.

Quite the worst feature in the steady increase in this type of housing is the use of two-storied terrace houses by more than one family. Efforts are being made to deal with this problem through private act powers to require separate access from each letting to sanitary conveniences. At the present time very considerable inconvenience and embarrassment can be caused to the occupiers of the ground floor accommodation in such houses.

New house building in Leicester

	1967	1966	1965	1964	1963
by Housing Committee	491	484	249	322	262
by private builders	398	315	337	207	267
Totals	889	799	586	529	529

Since 1946 the Council has built 17,312 houses and flats.

Housing-generally

What was said in last year's Report as to the urgent need for ways and means to be found for prolonging the life of the many well built homes in the City which fall short of present day amenity standards and for dealing with the whole environment in such areas of residential accommodation still stands. It is encouraging to know that there is now the promise of legislation which will further this end.

Common Lodging House

The only common lodging house in Leicester continues to be well run and has had quite a lot of improvements made in it. Accommodation is for 88 men.

There is also some provision of a like nature for both men and women at Hillcrest.

Property enquiries

5,949 enquiries were answered relating to the expectation of life and outstanding repair notices on dwelling-houses which were changing ownership, offered to the Council for advance purchase or subject of applications for improvement grants.

Drainage, sanitation and water supply

During the year further progress was made in the demolition of houses lacking a separate water supply or separate water closet, viz.

19 houses without internal water supply.

237 houses sharing water closets.

The number of known cesspools in the city is 17 and pail closets 31.

In 51 cases renewal of sanitary appliances or drainage works was carried out in default of owners. The cost of these works was £514 12s. 10d.

City Drinking Water

Regular samples for bacteriological examination were taken during the year from all types of premises, including dwelling houses, food factories, schools and offices. 154 samples were taken and results were generally satisfactory. A few samples gave higher colony counts than usual for city supply water, but on re-sampling satisfactory results were obtained.

A further 14 samples were taken for chemical examination including a survey for the presence of lead in drinking water. All were reported as being free from lead.

Whilst there is now hardly a house in the City without an internal piped supply of water difficulties arise frequently when several houses are on one branch supply pipe. These are cases where the pipes are old and corroded and the act of drawing off water in one house makes it impossible to get a ready supply of water in the other houses.

Provision for dealing with this problem is being made in the Leicester Corporation Bill.

Swimming Pools

All the Corporation indoor baths and private outdoor pools were inspected regularly during the year and samples of water taken for bacteriological examination.

Number of samples taken: 95.

Samples are also taken regularly from indoor school swimming pools.

Two samples from a private outdoor pool were unsatisfactory but after advice and re-sampling satisfactory samples were obtained.

Caravans—itinerants

Although itinerant van dwellers continued to use sites particularly those owned by the Corporation which have been left vacant by slum clearance, activity by this Department during the year was on a reduced scale. The Beau-manor Road Comprehensive Redevelopment Area, a source of trouble in 1966, has been effectively sealed off. Sites in Corporation ownership are dealt with by the Departments concerned and the Estates, Education and Cleansing Departments took action during the year. A private industrial estate to the north of the city in the course of development was at one time during the winter occupied by over forty vans. This site was eventually cleared as development proceeded.

There will be no effective solution to the problems of itinerant van dwellers until legislation requiring the provision of sites is in force. A Private Members Bill dealing with Caravan Sites is at present being considered by Parliament.

Showmen's Guild Site

This site is used as winter quarters by about 35 members of the Showmen's Guild and again was well conducted and gave no cause for complaint.

Offices, shops and railway premises Act 1963

Working Conditions

Registration and Inspection

194 premises were registered during the year. The majority of these were unregistered premises discovered in the course of normal duties under the Act. All registered premises have received at least one general inspection since the Act came into operation. The opportunity was taken during the year to check the number of registered premises and persons employed.

General provisions

No major infringements of the Act were revealed during the year, and administration did not present any difficulties. A list of the contraventions found, all of which were notified to the responsible parties in writing, is on page 109.

Special attention was paid during the year to dangerous machinery and advice given verbally and in writing, particularly to users of food slicers. Nineteen complaints from employees were received and seven of these were found to be justified. All complaints except one were in relation to inadequate heating facilities, the exception received during the summer related to complaints from the employees of the food department of a large store who complained of excessive discomfort. The external temperature was in the mid-seventies (F°) and the store temperature was 85°F and was aggravated by the demands of the refrigeration units of the frozen food display cabinets. The firm expressed their willingness to co-operate, but it was difficult to insist on expensive improvements to the ventilation system when the extraordinary thermal conditions were caused by one of the rare heat waves experienced in this country.

Accidents

89 accidents were reported during the year and 50 were investigated. None was fatal and injuries received were mostly of a minor nature. Two accidents from meat slicing

machines were reported. Both occurred whilst authorised employees were cleaning the machines according to laid down instructions. An accident involving an electrically powered calculating machine occurred in the office of a large wholesale footwear firm. A sixteen year old operator trapped her fingers in the machine causing severe lacerations. The machine, one of ten in the office, has information fed into it through a keyboard. This information is then interpreted by the machine and printed on to panel cards which are delivered on to a small integral tray at the rear of the machine. Behind this tray is a print wheel which reverses on to a typewriter. The operator was attempting to release the typewriter ribbon which had become entangled when she trapped her fingers between the print wheel and the gears. The machine which was in operation at the time is totally enclosed by a metal outer casing except for the print wheel and the gears. The casing is divided into two sides each of which can be swung away on a pivot exposing the whole of the internal workings of the machine. This can be done without switching off the machine. The employers were informed that there was a risk of similar accidents occurring in the future. They raised the point that the machines were hired from the manufacturers and questioned who should be responsible for the guarding. They were informed of their responsibility and took up the matter with the manufacturers who agreed to modify the machine.

Sanitary Accommodation in Factories

As the responsibility of local authorities in factories under the Factories Act is limited to the provision and maintenance of sanitary accommodation, no routine inspections are carried out in factories. Information of defects and deficiencies is received from the Factory Inspectorate and occasionally directly from workers in the factories; in these cases prompt action is taken.

Outworkers

During 1967 outworkers in 1303 homes in the city were notified to the local authority as required by the Factories Act.

Clean air

Domestic Smoke

Eighteen smoke control orders are now in operation. These cover a total of 18,631 private houses, 14,742 council houses and 2,685 industrial, commercial and other premises.

The Council has now given approval to phase two of the Smoke Control programme which envisages a further 39,000 private houses, 9,000 council houses and 9,247 other premises being brought under smoke control within eight years and the city will be completely smoke controlled by 1975.

Industrial Smoke

Routine smoke observations continued to be carried out on industrial chimneys during the year. These resulted in the service of thirteen statutory notifications of offences under Dark Smoke (Permitted Periods) Regulations 1958. In addition, eighteen informal notifications were also given. In every case the written notifications are sent subsequent to a visit by a Smoke Inspector. It is found generally that this approach together with the routine inspections which are carried out on industrial boiler plant is sufficient to bring about a satisfactory reduction in smoke emissions without recourse to legal proceedings.

New Furnace Installations

40 notifications were received during the year involving the installation of 51 furnaces. Of these 32 were oil fired and 16 gas fired. In only 3 cases was coal chosen as the fuel. A further 4 furnaces were converted from solid fuel to oil firing.

The declining popularity of coal as an industrial fuel is again underlined.

Three applications for prior approval of industrial furnaces were received. All of them satisfied the requirements of the Department and were granted.

Chimney Heights

Reference has been made in previous annual reports to the Department's policy of adhering to the Ministry of Housing and Local Government Memorandum on Chimney Heights as a basis for calculating the heights of industrial chimneys. The Memorandum has now been revised. The new Memorandum recognises that 40 ft, which was the original minimum recommended height for industrial chimneys is unduly onerous in the case of very small heating installations. The new minimum chimney height is 16 feet and no provision is made for chimneys emitting less than 3 lbs of SO₂ per hour.

The effect of these changes is that with small installations the Department's sole consideration is whether or not a proposed chimney will give rise to a nuisance. The matter of the SO₂ emissions affecting ground level concentrations of sulphur is left out of account.

With larger installations however this latter consideration continues to be of prime importance and great care is taken to ensure that new chimneys are of sufficient height to effect the greatest disposal of the flue gasses.

Grit and Dust

Four complaints of nuisance from grit and dust were received. Two of these were concerned with dust being blown from stockpiles of coal on to adjacent residential property and were resolved by the provision of water sprays.

The other two complaints involved industrial boiler plant. One was due to the grit arrester not being emptied as often as it should. The other arose from emissions of grit from a

chimney serving an industrial boiler fired by a sprinkler stoker. Sprinkler stokers are one of the most common causes of grit emissions and owners of plant using this type of stoker are encouraged to change to other methods of firing wherever possible. In this instance the premises are included in a smoke control area which became operative in November of this year. The particular stoker in question was unsuitable for use in a smoke control area and has been taken out and replaced by an underfeed stoker.

Noise

44 complaints were received during the year and all were investigated. 20 complaints involving 15 industrial and 5 commercial premises were found to be justified. One statutory notice was served and all the remainder were dealt with by informal action with a satisfactory reduction in noise level.

The statutory notice dealt with noise nuisance from a factory producing plastic heels using injection moulding techniques.

Complaints began shortly after the firm occupied the premises and it was found that two noise sources were involved. One was a diesel compressor of the type normally used for road breaking. This had been modified to generate electricity and was situated in an open yard at the rear of the building and was in operation from 8 a.m. to 6 p.m. The other source was the plastic injection moulding machinery which operated 24 hours per day. Together these two sources caused noise nuisance to residents on all sides of the factory.

In order to substantiate the complaints it was necessary for public health inspectors to carry out observations throughout the 24 hour period.

The most common cause of complaint was noisy industrial machinery in mixed industrial and residential areas

generally where night shift work was in operation. In the investigation of these complaints public health inspectors frequently had to make late night and early morning visits using noise-level measuring equipment. Generally speaking co-operation with the management of the factories and premises concerned was excellent. When it was realised that complaints were substantiated everything possible was done to reduce the noise level.

In March 1967 the British Standards Institution published British Standard 4142 "Method of Rating Industrial Noise affecting Mixed Residential and Industrial Areas". This has been used during the year, but it is too early to comment on the criteria laid down in this publication.

Food

Food Hygiene

During the year there was an improvement in the frequency of inspection of premises where meals and food snacks are prepared and sold.

This was the result of the appointment of a further specialist inspector and also a young woman with experience in the catering industry as a Technical Assistant. This increase in staff enabled all the 530 factory and commercial canteens in the city to be inspected, and as a result 172 notices of contraventions of the Regulations were sent out. At the end of the year approximately 85% of the work required had been carried out. In addition, cafes, hotels, public houses, licensed clubs received 803 inspections and notices of contraventions were served where necessary.

These more frequent visits have not only meant an improved standard of hygiene, but also time has been available for the inspectors to explain to the staff why hygienic practices are necessary.

During the year there has been an expansion in the number and scope of lectures and demonstrations given to food handlers. It is not always appreciated by the industry that cleaning staff have an important part to play in the production and sale of safe food, and talks particularly aimed at this type of worker have been given.

Generally speaking all premises in the city comply with the structural requirements of the Regulations. It has been the aim during the year to persuade occupiers to improve their premises beyond this standard. For example, stainless steel equipment and wash hand basins actually in the food preparing rooms have been asked for wherever practicable. In general the response of the industry to this up-grading of requirements has been most encouraging.

Consumer protection

Food and drugs continued to be sampled selectively

Food Hygiene (General) Regulations 1960

Premises covered by the Regulations	
Grocers and general dealers	1144
Public houses and clubs	315
Butchers' shops and meat product factories	330
Fruiterers and greengrocers	194
Fishmongers and fried fish shops	120
Bakeries	24
Confectioneries and bakers' shops	364
Hotels, restaurants and cafes	251
Factory canteens	530
Other premises	32
Total	3304

during the year. The specialist inspector engaged on sampling gave his attention to foods sold from a wide selection of shops and stalls. A close scrutiny of labels and a watch for new products is an important part of the sampling procedure; and this has been made easier by the open displays of the modern supermarket. On the other hand the range of foodstuffs on sale, particularly imported varieties, including those from Europe, Asia and Latin America has increased tremendously.

The total number of food and drug samples excluding milk was 897 and of these 38 or 4·2% were reported as unsatisfactory.

A total number of 1,034 milks were sampled for chemical analysis with 19 or less than 1·0% reported as unsatisfactory. In view of the small amount of unsatisfactory milk samples in recent years, it has been decided that after 1967 the milk sampling programme will be considerably reduced. It is expected that this will allow more time to be spent on sampling and analysis of food other than milk and drugs.

All samples for bacteriological examination with the exception of milk and shellfish were sent to the Public Health Laboratory Service.

Milk and Dairies

As a result of continued co-operation with the four local dairies, fifteen samples of untreated milk from farms were found to contain added water during the year. The dairies make a practice of reporting to the Department when their control samples indicate added water or antibiotics. In this way time wasting, official sampling of churns and tankers is obviated. Ten of the unsatisfactory samples were from one dairy farmer, five being informal samples taken at the processing dairy and the remainder formally at the farm. The farmer's in-churn cooler was found to be leaky and subsequently a fine of £25 was imposed at the Magistrates Court.

The remaining five samples of untreated milk which

contained added water were also found to be caused by a leaky cooler. No proceedings were taken due to the personal circumstances of the farmer who was taken to hospital seriously ill on the morning that the samples were taken. He was running his farm single handed with no family or relatives. The total daily consignment of milk to the processing dairy from this farm was only six gallons in two churns from four cows.

Two samples of pasteurised milk were found to contain added water. One from a small dairy in the city was a routine sample from the first milk off the plant. The other was taken at the Leicestershire County Show from a mobile milk bar and contained 7% of added water. No reason could be given by the vendors for the adulteration, and although proceedings were authorised it was not possible to proceed because the 28 day period required by Section 108 of the Food and Drugs Act 1955 expired before the information could be laid.

Three samples of untreated milk from a farm supply which were low in fat were also reported although it was established that the milk was in its natural condition. No statutory action was taken.

Two samples from pasteurised milk supplied to a local hospital from a dairy outside the city failed the Methylene Blue (keeping quality) test and the local authority was informed. In addition a sample of untreated milk from a hospital farm and a pasteurised milk from a processing dairy failed the test. There was a marked improvement in the keeping quality of pasteurised milk from vending machines, all samples being satisfactory.

For many years at the request of the Ministry of Health, it has been the practice to take regular samples of untreated milk from the two Hospital farms in the city for bacteriological and biological examination. During the year milk production at these farms ceased.

Sampling for the presence of antibiotics in untreated farm milk continued, but of the 130 samples taken only one was positive.

Food and Drugs

A total of 897 samples of foods and drugs were submitted to the Public Analyst for analysis. Twenty-seven samples of food and eleven samples of drugs were reported as unsatisfactory.

Three successful prosecutions under Section 2 Food and Drugs Act 1955 were taken. One was for pork sausage deficient in total meat content and another was for watered gin. The third related to an Indian dish called KHABLI-CHAMA which should consist of chickpeas in a spiced sauce. The sample actually contained a salt solution together with a small amount of an Indian fruit called Tindas.

The remainder of the unsatisfactory samples which are detailed in the Public Analyst section of the Report were dealt with informally with the manufacturers and assurances given that the products would be satisfactory in labelling or compositions in the future.

Advertising of food

An important part of consumer protection is the watch that must be kept on the advertisement of food.

During the year exception was taken to an advertisement which appeared on television claiming that there was whole milk in a product called Instant Creamed Potatoes, when in fact dried skimmed milk was used. After correspondence with the Independent Television Authority and the manufacturers of the product, the advertiser agreed to change the script.

Complaints

One hundred and sixteen complaints were received from the public relating to the following foods: Milk—20, Butter—1, Cheese—7, Bread—21, Canned Meat (Imported)—7, Cooked Meat—1, Meat Pies—9, Fish—3, Canned Fruit—2, Jam—1, Vegetables—2, Cereals—4, Confectionery—17, Other Foods—21. Eleven of these complaints concerned

imported food and the canners overseas were informed. All the other complaints were fully investigated with the manufacturers, wholesalers, or retailers in this country. In one case it was considered necessary to prosecute for a large piece of metal from a sieve found in a can of stewed steak with onions.

The Liquid Egg (Pasteurisation) 1963 Regulations

There are no liquid egg pasteurisation plants in the City. Two samples from local bakeries passed the Alpha Amylase Test.

Poultry Inspection

There are three poultry processing premises in the City and most of the trade is in uneviscerated birds marketed within 24 hours of slaughter.

The total number killed was about 630,000 which included hens (50%), broilers, capons and a few turkeys. Approximately 12 tons or 1% were rejected as unfit.

Flocks are "culled" on collection and obviously unfit birds rejected at this stage. Carcasses are examined by experienced staff at the slaughtering premises, and the weight of poultry condemned includes conditions such as poorness and deformity.

Periodic visits are made by public health inspectors to check on plant hygiene and the efficiency of the inspection system. 160 such visits were made in 1967.

Legal Proceedings				Fines
Statute under which proceedings instituted			Default or offence	£ s d
Food & Drugs Act 1955 Section 2			Incorrectly labelled food	20 0 0
" " " "	" "	" "	Pork sausage low in meat content	20 0 0
" " " "	" "	" "	Gin containing water	25 0 0
" " " "	" "	" "	Metal in minced beef with onion	20 0 0
" " " "	" "	Section 32	Milk containing water	25 0 0

City of Leicester Clean Food Guild The following table shows the number of premises in respect of which Certificates have been awarded by the Guild			
	Trade	Applications	Certificates granted
Bakers and confectioners	20	20	
Catering establishments	31	27	
Fishmongers and fish fryers	16	11	
Fruiterers and greengrocers	8	8	
Grocers and general stores	99	42	
Ice cream	1	1	
Manufactured meat products	6	.	
Retail butchers	41	29	
Sweets	5	5	
Totals	227		143



Meat Inspectors at Work

Paul Stokes, Photographer.

Meat inspection

Meat inspection—slaughtering

There are five licensed slaughterhouses at the Cattle Market and one other on the Thurmaston side of the City.

Slaughtering Hours

Slaughtering at the Cattle Market is limited to the periods between the hours of 7 a.m. and 7 p.m. Monday to Friday, and 7 a.m. to 1 p.m. on Saturday. At the other slaughterhouse killing is permitted up to 8 p.m. on one evening each week. Only exceptionally is Sunday slaughtering allowed and then only in special circumstances and with the consent of the Chief Public Health Inspector.

The number of animals slaughtered at the Cattle Market was 177,856 and the total for the whole of the city was 183,790. A 100% inspection was carried out and the amount of meat and offal found to be unfit for human consumption was nearly 87 tons; this was an increase of 18 tons over the amount for the previous year.

Ante Mortem Inspection

Ante-mortem inspection is carried out regularly and during the Foot and Mouth epidemic particular attention was paid to this aspect of the inspection procedure. All suspect animals were isolated pending further investigation, but no animal was found to be infected with the disease. Stringent cleansing and disinfection operations were carried out during the period of the epidemic with the fullest co-operation of the meat trade.

Listeriosis

During the course of ante-mortem inspection an animal was seen to be showing signs of inco-ordinated movement of the limbs. Its brain was sent to Dr. Dorothy Jones of the Medical Research Council Unit at Leicester University for laboratory examination and was found to be affected with Listeriosis, a type of encephalitis which may be trans-

mitted to man. This finding was confirmed by Dr. N. S. Mair, Director of the Public Health Laboratory Service in Leicester to whom a portion of the brain was also submitted.

In view of the potential hazard to human beings it is now the practice at Leicester for the brain of any animal showing signs of inco-ordination to be submitted for laboratory investigation.

Cold Stores

In addition to meat inspection at the slaughterhouses daily visits are made to the two wholesale meat depots and cold stores in the city.

Educational

During the year several visits were made to the Cattle Market by Sixth-form Biology and Domestic Science Students from various schools. The Students were given lectures and demonstrations in the hygienic handling of meat and food and other aspects of the meat industry.

Anatomical specimens are supplied to the University, Colleges and Schools for research and educational purposes.

Health Education

The contribution of the Public Health Inspection Service to Health Education in the city is steadily expanding.

A substantial part of this work has taken the form of lectures to food handlers on the subject of Food Safety. Twenty four such talks have been given and a total of 530 food handlers were involved.

Lectures to members and trainees of other sections of the Health Department have continued, 8 groups comprising 111 persons having been addressed. Talks have been given to 108 students in four sessions at courses in Adult Education Establishments and 5 talks to some 220 school children on Environmental Health and Clean Food. Six groups of Student Nurses have attended lectures on various aspects of environmental health.

In common with other sections of the Health Department, Public Health Inspectors are invited to speak at evening meetings of social and educational organisations in the city. Seven such meetings have been addressed on various aspects of the Public Health Inspectors work, the numbers involved being 150 persons.

General sanitary circumstances

Complaints received and investigated

Housing defects	1088
Choked and defective drains	187
Water supply—defective or insufficient	32
Flood water in houses	33
Overcrowding	25
Caravans	11
Keeping of animals	17
Accumulation of offensive matter	122
Factory conditions (sanitation)	3
Smoke nuisances	35
Grit nuisances	5
Fumes and steam	28
Noise nuisances	42
Offensive odours	111
Food Hygiene Regulations	11
Infestation a Insect pests	217
b Rats and mice	2235
Miscellaneous	24
Total	4226

Synopsis of inspection work	Inspections	b/f 26339
Dwelling houses For housing defects under Public Health Acts	1847	
Under Housing Acts Overcrowding Inspections	23 2570	
Dangerous structures	26	
Land Charge visits	670	
Meetings with Owners or Tradesmen	1321	
Rent Act, 1957 Certificates of disrepair	30	
Drainage: Tests and inspections	1058	
Common lodging house	20	
Houses in multiple occupation	1303	
Van dwellings	126	
Infectious disease enquiries	308	
Industrial premises Factories	52	
Noise nuisances	297	
Smoke abatement		
Smoke observations (industrial, business and domestic)	594	
Visits re smoke, industrial, smoke control areas, etc.	13610	
Offices, Shops and Railway premises Act 1963		
Leicester Corporation Act 1956 Hairdressers' premises	1325	
Nuisances Offensive accumulations	77	
Keeping of animals, poultry, swine, etc.	406	
Tips (refuse)	104	
Ditches and watercourses	84	
Verminous premises	277	
Flooding of cellars	96	
Offensive odours	101	
	c/f 26339	
		Total 33202
		Re-inspections 17680
		Grand Total 50882
	Notices served	Informal 1546
		Formal 605
	Complied with	Informal 1134
		Formal 113

Legal proceedings

Statute under which proceedings were instituted	Fine £	s	d
Public Health Act 1936 Section 39			
Failure to comply with statutory notice for leaking eaves gutter	5	0	0
Public Health Act 1936 Section 45			
Failure to comply with statutory notice to carry out repairs to water closet	5	0	0
Public Health Act 1936 Section 92			
Failure to comply with statutory notice to abate nuisance caused by disrepair	Nuisance order made		

Housing: Clearance areas reported to the Council through the Slum Clearance and Re-development Committee

Area No.	Name	C O or C P O	No. of houses	Other buildings
344	Biddulph Avenue	C O	7	.
345	Maynard Road	C O	8	.
346	Vulcan Road	C O	17	.
347	Charnwood Street (No. 1)	C P O	42	1
348	Farnham Street	C P O	158	3
349	Flint Street	C P O	4	.
350	Humberstone Road (No. 2)	C P O	2	.
351	Humberstone Road (No. 3)	C P O	1	1
Totals		239	5	

Post-war slum clearance

	C O	C P O	No. of houses In orders	No. of houses Confirmed
1953	.	1	270	270
1954	.	5	670	664
1955	.	6	155	123
1956	14	7	577	282
1957	23	11	1076	534
1958	27	24	769	645
1959	2	11	1104	716
1960	4	19	519	1118
1961	3	4	576	344
1962	.	6	240	801
1963	1	3	456	247
1964	1	32	801	54
1965	1	9	954	1061
1966	10	5	452	676
1967	3	5	239	579
Totals	89	148	8858	8114

Unfit houses dealt with individually 1 individual house has been demolished.

Individual unfit houses, 1953-1967

Act under which action taken	Houses represented to Health Committee	Houses on which Order made	Statutory U/T not to re-let	Houses vacated	Awaiting removal
<i>Housing Act 1957, Sect. 17—demolition orders</i>	379	354	25	379	.
<i>Housing Act 1957, Sect. 17—closing orders</i>	75	75	.	75	.
<i>Housing Financial Provisions Act, 1958</i>	102	102	.	102	.
<i>Voluntary undertakings</i>	.	.	24	24	.
<i>Housing Act 1957, Sect. 18—closure of rooms</i>	6	6	.	.	.

Housing Statistics for year ended 31st December 1967

1 Unfit dwelling houses—inspection

1 a Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	2631
b Number of inspections made for the purpose	4873
2 a Number of dwelling houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932	784
b Number of inspections made for the purpose	2048
3 Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	560
4 Number of dwelling houses (exclusive of those referred to under the preceding sub-heading) found to be not in all respects reasonably fit for human habitation	1146

2 Remedy of Defects without Service of Formal Notices
Number of defective dwelling houses rendered fit in consequence of informal action by Local Authority or their officers

3 Action under Statutory Powers

A Proceedings under Sections 9, 10 and 16 of the Housing Act 1957	
1 Number of dwelling houses in respect of which notices were served requiring repairs	.
2 Number of dwelling houses which were rendered fit after service of formal notices:	.
a By owners	.
b By Local Authority in default of owners	.

B Proceedings under Public Health Acts:

1 Number of dwelling houses in respect of which notices were served requiring defects to be remedied	171
2 Number of dwelling houses in which defects were remedied after service of formal notices:	
a By owners	180
b By Local Authority in default of owners	14

C Proceedings under Section 17 of the Housing Act 1957

1 Number of dwelling houses in respect of which Demolition Orders were made	.
2 Number of dwelling houses demolished in pursuance of Demolition Orders	1

D Proceedings under Section 18 of the Housing Act 1957:

1 Number of separate tenements or underground rooms in respect of which Closing Orders were made	.
2 Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	.

Number of houses in respect of which Closing Orders were made under Section 17 of the Housing Act 1957

Number of houses dealt with under Housing Financial Provisions Act 1958

Number of houses dealt with under Sections 12 to 16 of the Housing Act 1961 (Houses in Multiple Occupation)

82

14

1

105

Housing Act 1964

**Compulsory Improvement of Dwellings to provide
Standard Amenities**

1 Area Improvement

Areas declared	4
Containing: total dwellings	1551
Improveable dwellings (owner/occupier and tenanted)	989
Tenanted improveable dwellings	369
Preliminary Notices served proposing improvement to:	
Full standard	188
Reduced standard	NIL
Undertakings given	8
Improvement Notices Served:	
Immediate	19
Suspended	144
Final	9
Appeals under Section 27	NIL
Notices withdrawn	
Immediate	NIL
Suspended	NIL
Final	NIL
Improvement works completed	47

2 Improvement of dwellings outside Improvement Areas

Preliminary Notices served	50
Undertakings given	20
Improvement notices served	27
Improvement works completed	46

3 Improvement of dwellings in tenement blocks**4 Enforcement****5 Purchase**

Improvement grants	Standard grants			Discretionary grants		
	During year 1967	During year 1966	Since commencement of scheme	During year 1967	During year 1966	Since commencement of scheme
Applications received	932	750	5072	28	36	2243
Approved by Housing Committee	773	610	4096	40	33	1616
	£	£	£	£	£	£
Amount of grants paid on applications approved	55639	55965	263396	9634	5092	222924
Amount to be paid by Council	13909	13991	65849	2409	1273	55531

(from Annual Report of Housing Manager)

Rent Act 1957 Applications for Certificates of Disrepair

	1967	1966	1965	1964	1963
Applications received	19	34	16	21	42
Certificates granted	8	10	5	8	16
Certificates cancelled	5	3	3	10	6
Undertakings accepted	8	18	7	11	22
Applications withdrawn or pending	3	6	4	2	4

Offices, Shops and Railway Premises Act, 1963 Registration of general inspections

Class of premises	Number of premises registered during the year	Total number of registered premises at end of year	Number of registered premises receiving a general inspection during the year
Offices	83	1183	575
Retail shops	90	1526	406
Wholesale shops, warehouses	9	232	56
Catering establishments open to the public, canteens	14	206	265
Fuel storage depots	.	.	.
Totals	196	3147	1302

Number of visits of all kinds by inspectors to registered premises 3110

Analysis of persons employed in registered premises by workplace

Class of workplace	Number of persons employed
Offices	10537
Retail shops	8389
Wholesale departments, warehouses	2466
Catering establishments open to the public	1307
Canteens	8
Fuel storage depots	.
Total	22707
Total males	11091
Total females	11616

Summary of contraventions

Section 4	Cleanliness	36
5	Overcrowding	.
6	Temperature	114
7	Ventilation	34
8	Lighting	8
9	Sanitary conveniences	64
10	Washing facilities	44
11	Supply of drinking water	2
12	Clothing accommodation	4
13	Sitting facilities	.
14	Seats (Sedentary workers)	.
15	Eating facilities	1
16	Floors, passages and stairs	27
17	Fencing exposed parts of machinery	6
18	Protection of young persons from dangerous machinery	.
19	Training of young persons working at dangerous machinery	.
23	Prohibition of heavy work	.
24	First Aid	100
	Other matters	243
	Total	683

Observations on the administration of the Factories Act, 1961, Part 1 of the Act

Inspections for the purpose of provisions as to health (inspections made by Public Health Inspectors)		Premises	Number on Register	Inspections and re-inspections	Written notices	Occupiers prosecuted
i	Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by the Local Authority		25	.	.	.
ii	Factories not included in (i) in which Section 7 is enforced by the Local Authority		2054	18	5	.
iii	Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers premises)		.	.	.	.
		Total	2079	18	5	.

Cases in which defects were found

Particulars	Found	Remedied	Referred to H.M. Inspector	Referred by H.M. Inspector	Number of cases in which prosecutions were instituted
Want of cleanliness (Sect. 1)	.	.	.	.	.
Overcrowding (Sect. 2)	.	.	.	.	.
Unreasonable temperature (Sect. 3)	.	.	.	.	.
Inadequate ventilation (Sect. 4)	.	.	.	.	.
Ineffective drainage of floors (Sect. 6)	.	.	.	.	.
Sanitary conveniences (Sect. 7) a Insufficient	.	.	.	.	.
b Unsuitable or defective	7	9	.	8	.
c Not separate for sexes	1	1	.	.	.
Other offences against the Act (not including offences relating to outwork)	.	.	.	.	.
	Total	8	10	8	.

Outwork (Sections 110 and 111)

Total number of outworkers in August 1967

Wearing apparel, Making, etc. 1295

Basket makers and repairers 1

Food distribution 1

Dyers and finishers 6

Total 1303

Smoke Control orders in force

Area No.	Area Name	Operative Date	Council Houses	Private Dwellings	Other Buildings
1	St. Matthews	1 Sept. 1958	735	1	3
2	Central	1 Sept. 1959	.	45	504
3	Lee Street	1 Sept. 1960	34	93	346
4	Church Gate	1 Oct. 1961	.	98	321
5	Aerodrome		438	6	29
6	Lutterworth Road		1821	1032	61
7	Dane Hills	1 Oct. 1962	467	1443	32
8	New Parks	1 Oct. 1963	3570	118	19
9	Highcross Street		.	47	167
10	Braunstone West	1 Oct. 1964	2100	8	8
11	Granby		.	132	753
12	Willow Street		737	2	17
13	Tudor Road	1 Dec. 1964	.	1057	44
14	Braunstone Park	1 Dec. 1965	1150	6	5
15	Fosse	1 Dec. 1965	.	4513	89
16	Narborough Road	1 July 1967	1590	3430	68
17	Aylestone	1 Nov. 1967	100	3600	98
18	Beaumont Leys	1 Nov. 1967	2000	2875	121
		Totals	14742	18506	2685

Smoke Control orders (confirmed)

Area No.	Area Name	Operative Date	Council Houses	Private Dwellings	Other Buildings
19	Saffron 1	1 Nov. 1968	1448	5	10
20	West Knighton	1 Nov. 1968	5	1404	17
21	Aylestone Road	1 Nov. 1968	55	1165	115
22	Victoria Park	1 Nov. 1968	75	382	146
23	Abbey Park	1 Nov. 1968	40	956	297
24	Corporation Road	1 Nov. 1968	10	1667	121
Totals		1633	5579	706	

Smoke Control orders (proposed)

25	Knighton	1 Nov. 1969	.	6061	Not yet determined
26	Saffron II	1 Nov. 1969	930	.	"
27	Belgrave	1 Nov. 1970	687	4879	"
28	Stoneygate	1 Nov. 1971	57	3004	"
29	Mayflower	1 Nov. 1971	377	1662	"
30	Crown Hills	1 Nov. 1972	843	6323	"
31	Spinney Hill	1 Nov. 1973	31	4768	"
32	Netherhall	1 Nov. 1973	1541	598	"
33	West End	1 Nov. 1973	.	134	"
34	Spencefield Lane	1 Nov. 1974	961	2593	"
35	West Humberstone	1 Nov. 1974	579	1423	"
36	Thurncourt Road	1 Nov. 1975	1749	106	"
37	Rushey Fields	1 Nov. 1975	.	1427	"
38	Thurmaston Lane	1 Nov. 1975	.	1203	"
Totals		7755	34181		

Food and Drugs Act, 1955

Milk Sampling

Bacteriological samples also examined for chemical quality	590	Number of samples	4
Dairy control samples	396		
Churn samples (ex farm supplies)	26		
Formal milk samples	22		
Total		1034	

Number of samples deficient in fat	3
Number of samples deficient in solids not fat	.
Number of samples containing added water	17

Milk (Special Designation) Regulations, 1963-65

Pasteurised milk (bottles and cartons)	402
Pasteurised Channel Island milk (bottles)	35
Sterilised milk (bottles)	96
Pasteurised milk ($\frac{1}{3}$ pints from school supplies)	34
Untreated (farm bottled) milk	12
Untreated milk—ex hospital farms	11
Pasteurised milks (dairy control samples) phosphatase test only	396
Total	
	986

Methylene blue test failures (keeping quality)	4
--	---

Bacteriological Examinations of milk bottles and churning

Rinses from churning and bottles were taken at regular intervals in order to assess the efficiency of the washing plant at the dairies.

Number of bottle rinses taken	276
Number unsatisfactory	25
Number of churn rinses taken	152
Number unsatisfactory	6

An unsatisfactory bottle has a count of more than 600 colonies and an unsatisfactory churn more than 250,000 colonies.

Biological Milk Sampling

Number of samples	4
The above samples which were taken from the Towers and Glenfrith Hospital Farms were submitted to the Public Health Laboratory and reported as free from tubercle bacilli and brucella abortus.	

Examination of milk supplies for Antibiotics

Number of samples taken	130
Number unsatisfactory	1

The unsatisfactory sample was investigated at the farm concerned.

Food and Drugs Act, 1955

Sampling of food and drugs other than milk

The following is a summary of samples submitted to the Public Analyst. Full details appear in the City Analyst's section of this Report.

Food Samples—Formal	19
Food Samples—Informal	782
Total	
	801
Number unsatisfactory	27
Drugs samples—informal	96
Number unsatisfactory	11
Total Food and Drugs samples	897
Total number unsatisfactory	38

Ice Cream Sampling

Bacteriological Examination

Fifty-four samples of ice cream were submitted for bacteriological examination during 1967.

	Satisfactory	Unsatisfactory
Soft Ice Cream	46	3
Other Ice Cream	5	.

Unsatisfactory samples were followed up; advice given and satisfactory samples obtained.

Chemical Examination

	Number of samples	51
All these were reported as conforming to the Food Standards (Ice Cream) Regulations, 1959.		

Fresh Cream Sampling

	Number of samples	144
Number reported as positive for E Coli Type 1		14
Unsatisfactory results were followed up at the cream handling plants concerned, advice given where necessary and further samples taken.		

Bacteriological Examination of Shellfish

	Number of samples	31
Unsatisfactory samples		2

These included fresh mussels and cooked shellfish. Two of the latter were unsatisfactory and were reported to the packers concerned.

Other Sampling

Fertilisers and Feeding Stuffs Act, 1926

	Number of samples taken	
Fertilisers—informal	39	
Unsatisfactory	7	
Feeding stuffs—informal	12	
Unsatisfactory	.	
Total number of samples	51	
Unsatisfactory	7	

Rag Flock and other Filling Materials Act, 1951

Number of samples taken	4
All the samples were reported as satisfactory.	

Food

Food Hygiene (General) Regulations, 1960

Deficiencies found	
Insufficient or unsatisfactory sanitary accommodation	24
Absence of notices re hand-washing	22
Insufficient provision of sinks, washbasins and hot water	125
Absence of clean towels, soap, nailbrushes, at washing points	62
Insufficient accommodation for outdoor clothing	28
Absence of protective clothing (overalls, gloves)	.
Absence of First Aid equipment	69
Dirty food rooms	96
Dirty or defective utensils and equipment	219
Working surfaces, counters not non-absorbent	98
Defective surfaces to floors, walls, etc.	179
Insufficient storage and removal of refuse	98
Unsatisfactory lighting or ventilation	101
Food not protected from risk of contamination	56
Absence of food handling equipment	.
Unsatisfactory guarding to food slicer	18
Smoking in food room	1
Cleaning equipment stored in food rooms	60
Miscellaneous	23

Summary of foodstuffs condemned 1967

	Tons	cwt	qr	lb
	2	7	3	15
Fish (excluding shellfish)				
<i>Shell Fish</i>				
Oysters	.	.	.	.
Mussels	.	11	2	.
Cockles	.	.	.	20
Crabs	.	1	3	18
Whelks	.	.	.	20
<i>Other Shell Fish</i>	.	.	1	12
<i>Fruit</i>	14	11	.	25
<i>Meat</i>	English	26	5	1
	Imported	1	14	1
<i>Offal</i>	English	61	2	.
				4½
<i>Vegetables</i>	41	4	3	20
<i>Poultry</i>	.	18	.	27½
<i>Rabbits</i>	.	1	2	6½

Other foodstuffs

Baby foods	6 cans
Bacon	51 lbs
Cakes	4232
Cereals	12 lbs
Cheese	31 lbs
Coconut	75 lbs
Fats	87 lbs
Fish	3653 cans
Fish cakes	48
Flour	182 lbs
Ice cream	42 blocks
Jam	55 cans
Meat	6481 cans
Meat (cooked)	398 lbs
Milk	291 cans
Miscellaneous	1389 lbs
	38 cans
Pickles	28 jars
Puddings	147
Sauces	75 bottles
Sausages	216 lbs
Soups	168 cans
Tea	5 lbs
Vegetables	9307 cans

Slaughtering of animals for food, 1962-1967

		Casualty animals carcasses included in 1967 figures	1967	1966	1965	1964	1963	1962
Cattle excluding cows	25988	11	23134	19565	19101	19794	19586	
Cows	761	23	1030	1290	1963	2521	2568	
Calves	894	41	848	947	1272	2155	3079	
Sheep	92671	151	98146	92944	99470	100740	120216	
Pigs	63476	255	69302	60647	58373	54426	53772	
Totals	183790	481	192460	175393	180179	179636	199221	

Incidence of disease The following table summarises the quarterly returns made to the Ministry of Agriculture, Fisheries and Food in connection with research and disease control carried out by the Animal Health Division.

Adult Cattle	Condemnations			
	Number slaughtered 26749		Carcases	Offal
	Total	Partial	Total	Partial
Tuberculosis	11	2	13	59
Johne's disease	.	.	.	27
Actinobacillosis (-mycosis)	1	.	1	265
Septicaemic conditions	8	.	8	.
Peritonitis	.	.	.	11
Mastitis	.	.	.	37
Hepatic Abscess	.	.	.	1583
Fascioliasis (fluke)	.	.	.	5773
Parasitic pneumonia	.	.	.	36
Echinococcosis	.	.	.	32
Cysticercosis (C. Bovis) a Rejected	1	.	1	39
b refrigerated	24	.	.	.
Tumours	.	.	.	7
Bruising	3	21	3	.
Emaciation	.	.	.	.
Other conditions	3	2	3	109
Pneumonia	.	.	.	126

Calves	Condemnations			
	Number slaughtered 894		Carcases	Offal
	Total	Partial	Total	Partial
Congenital tuberculosis	.	.	.	.
Tuberculosis	.	.	.	.
Septicaemic conditions	10	.	6	.
Joint-ill or navel-ill	4	.	2	.
Bruising	.	.	.	2
Emaciation	2	.	1	.
Immaturity	5	.	3	.
Other conditions	1	.	.	.

Pigs		Condemnations			
Number slaughtered 63476		Carcases		Offal	
		Total	Partial	Total	Partial
Swine fever	.	.	.	.	.
Swine erysipelas	4	.	4	.	.
Tuberculosis	.	.	.	19	.
Septicaemic conditions	117	.	117	.	.
Pneumonia and/or pleurisy	.	.	.	1347	.
Pyaemia	75	.	75	.	.
Arthritis	18	19	18	.	.
Abscess	.	19	.	45	.
Echinococcosis	.	.	.	48	.
Ascariasis (Milk spot)	.	.	.	2000	.
Bruising	11	55	23	.	.
Other conditions	29	.	29	39	.

Sheep		Condemnations			
Number slaughtered 92671		Carcases		Offal	
		Total	Partial	Total	Partial
Septicaemic conditions	33	.	33	.	.
Pyaemia	11	.	11	.	.
Pneumonia and/or pleurisy	.	.	.	.	63
Arthritis	19	7	19	.	.
Parasitic pneumonia	.	.	.	.	209
Fascioliasis (fluke)	.	.	.	.	1756
Cysticercus bovis	.	.	.	.	12
Echinococcosis	.	.	.	.	116
Bruising	1	3	1	.	.
Emaciation	48	.	48	.	.
Other conditions	14	.	14	.	9

Other premises subject to inspection

	Knackers' yard	1
<i>Offensive trades</i>	a Hides and skins	1
	b Tripe dressers	1
	Pet shops	21
	Animal boarding establishments	1
	Riding establishments	2

Report for 12 months ended 31st December 1967

Type of property : non-agricultural properties other than sewers

1	Number of properties in district	110479
2	a Total number of properties (including nearby premises inspected following notification)	3441
	b Number infested by (i) Rats	2615
		(ii) Mice 826
3	Total number of properties inspected for rats and/or mice for reasons other than notification	3130
	b Number infested by (i) Rats	21
		(ii) Mice 61
	Number of wasps' nests destroyed	141
	Number of feral pigeons destroyed	1280

Report of the City Analyst

for the year 1967

E R PIKE, *BSc(Aston), MPhA, MPS, FIFST, FRIC*

I beg to submit for your consideration my seventh annual report, being an account of the work carried out in my department for the year ended 1967.

The samples examined are summarised as follows:—

Samples submitted under the Food and Drugs Act, 1955

(a) Submitted by Public Health Inspectors

i Milks for compositional analysis	1004
ii Milks for the presence of antibiotics	130
iii Milks for efficiency of heat treatment	494
iv Milks for keeping quality	846
v Foods (other than milk)	780
vi Drugs	101
vii Shellfish for bacteriological quality	24

(b) Food and Drugs submitted by private persons	30
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Samples submitted under the Fertiliser and Feeding Stuffs Act 1926 51

Samples submitted under the Rag Flock Act 1911 4

Miscellaneous Samples

Atmospheric pollution	2028
Samples examined for the Health Department	396
Samples examined for other Corporation Departments	227
Samples examined for other Local Authorities	450
Samples examined for private persons	385
Total	6950

In the past it has been the practice to compare the number of samples examined with those of previous years as a sort of measure of the productivity of the Department. Such a practice has become increasingly more misleading during the past few years, for such has been the increase in technology relating to foods, which in turn has been accompanied by a corresponding increase in legislation, that the work relative to a single sample may represent in itself a great work load. As an example a single sample of flour must be examined for general compositional character which means moisture, fat, mineral matter and protein estimation; secondly additives must be assessed. These additives are controlled by the Bread and Flour Compositions Regulations which require the addition of Iron, Vitamin B, Nicotinic Acid and Chalk between certain defined limits. Thirdly contaminants must be looked for. This involves a microscopical search for rodent contaminations by looking for hairs by means of the so called 'filth' test. Traces of Pesticides must also be analysed by the relatively new techniques of gas chromatography and then layer chromatography. The importance of this work will be realised if one remembers the very recent tragedies in Mexico, S. America and France where death and illness was caused to many people by the contamination of flour with Perathion and Ergot. This illustrates that one sample can involve the analyst in lengthy investigations using the most modern analytical techniques. Not only is chemical knowledge necessary for such examinations but the whole spectrum of scientific disciplines must be used. Microbiological techniques are used for the Vitamin analyses, the results of which in turn must be statistically assessed. Microscopy is needed to look for animal and insect contaminations, whilst pesticides are estimated by physical-chemical methods involving the use of electronic instrumentation.

From this it should not be difficult to realise that the technical skill expected of the personnel employed in a

Public Analyst's laboratory must be of an exceedingly high order. The knowledge of these assistants must extend, not only to chemistry, but cover a variety of scientific disciplines to a fair depth. Bacteriology, Entomology, Radiochemistry, Electronics, Pharmaceutics, Pharmacology, Pharmacognosy, Geology, etc., etc., are all subjects which at some time or other must be used to solve problems presented to the laboratory.

It is regrettable, however, that such variety, though leading to an interesting way of earning a living also requires an immense amount of study if a young assistant is to train with a view to obtaining a statutory appointment as a Public Analyst. Along the route of his studies the young analyst treads the paths of the dairy chemist, the water chemist, the sewage works chemist, the pharmaceutical analyst, etc. There is little wonder, therefore, that so many assistants finally decide to specialise in just one of these fields, especially when one realises that the financial reward will be of the same order as that paid to many public analysts and there is no need to spend much of their own time studying for the Diploma in Food and Drugs Analysis—a post graduate qualification legally necessary before one can apply for the statutory post of a public analyst. There is no doubt that unless there are some drastic changes in the very near future, lack of qualified personnel will cause a break-down in the service. Official statistics show that the average pass rate for the Diploma from 1951 to 1958 was 10 per year, whilst from 1959 to 1966 the average pass rate was 4 per year! During 1967 three persons were successful but during this same year 5 public analysts' posts became vacant because of retirement or death. Such a state of affairs explains the lack of applicants for the post of deputy which has been consistently advertised throughout 1967 without attracting a single acceptable applicant. The only reason for this was insufficient financial reward.

In spite of the lack of attraction of suitably qualified staff

to the profession of public analyst the work continues to expand. During 1967 many new regulations were made regulating the composition of a wide range of foodstuffs as detailed in the legal section of this report. The recently passed Medicines Bill will require laboratory facilities. Without proper provision of scientific equipment and the necessary staff to operate such apparatus it will be impossible to operate such legislation.

Extra responsibility has been inherited by public analysts under the Toys (Safety) Regulations 1967 which became operative upon 1st November 1967. They provide immediately for the prohibition of toys containing cellulose nitrate (except ping-pong balls!) and those that contain lead in excess of 1·1% in any paint film. The Farm and Garden Chemicals Act 1967 which was effective from 14th July 1967 is a permissive Act allowing the Minister to make Regulations from October 1968 regarding the labelling and toxic hazards of such preparations. These regulations will add to the pressure of work in the Public Analysts' laboratories.

In many respects 1967 has been a difficult year which would have been hard to bear without the enthusiasm and loyalty of the staff. An especial mention must be made regarding the junior staff who have accepted responsibilities usually reserved for senior members and indeed have had to be used to help train more academically qualified new senior staff. Without their help the work of the laboratory would surely have been exceedingly hampered. Finally I would be failing in my duties if I made no mention of the willing help and co-operation of the Food Inspectors who have enabled the examination of samples to proceed as smoothly as possible. I wish to express my appreciation accordingly.

E R PIKE, City Analyst

Legal

Legislation introduced during 1967 affecting the work of the Public Analyst.

Regulations

The Cheese (Amendment) Regulations 1966 (S.I. 1966 No. 1640)

These regulations amend the Cheese Regulations 1965 which became operative from 1st February 1967; they re-define "compound product", prescribe minimum fat and moisture contents for certain continental cheeses; require processed cheese described by a varietal name to comply with the standards of the named cheese; and postpone until February 1st 1970 certain labelling requirements.

The Sausage and Other Meat Product Regulations 1967 (S.I. 1967 No. 862)

These regulations should be read together, they:—
a specify requirements for the composition of the appropriate products.
b specify requirements for the labelling, description and advertising of such products.

The Artificial Sweeteners in Food Regulations 1967 (S.I. 1967 No. 1119)

These regulations supersede the Food Standards (Saccharin Tablets) Order 1953 and the Artificial Sweeteners in Food Order 1953.

Artificial sweeteners which may be used in food are defined as saccharin or cyclamic acid or the sodium as calcium compounds of these. Compositional requirements are specified for artificial sweetening tablets. Any food certified by a public analyst as containing a non-permitted artificial sweetener may be treated as unfit for human consumption under these regulations.

*The Solvents in Food Regulations 1967 (S.I. 1967 No. 1582) and
The Solvents in Food (Amendment) Regulations 1967 (S.I. 1967
No. 1939)*

Permitted solvents for use in foods are defined, and specifications of the purity of these are laid down. Regulations governing the labelling and advertising of solvents for food are made. Any foods containing solvents other than permitted solvents are to be treated as unfit for human consumption under the Food and Drugs Act 1955.

*The Merchandise Marks (Imported Goods) No. 7 Order 1934
Amendment Order 1967 (S.I. 1967 No. 1901)*

The importation and sale of certain kinds of imported meat and offals is prohibited unless an indication of origin is made in the manner specified in the Order.

The Labelling of Food Regulations 1967 (S.I. 1967 No. 1864)

These regulations supersede certain provisions of the Labelling of Food Order 1953 and become operative in the main from 4th January 1971. To the extent that they apply to any food (other than a soft drink) containing cyclamate, the regulations are operative from 1st January 1968.

The principal changes in the existing labelling law made by these regulations are:—

- a to amend and extend the provisions relating to the labelling of prepacked food and the list of goods to which they apply.
- b to impose requirements as to the labelling and advertisement of certain foods for retail sale which are not pre-packed; of food for sale from vending machines; and of tenderised meat.
- c to impose restrictions on the use of the word 'milk' on labels or advertisements.
- d to control the size of the printing of statutory requirements on labels and tickets.

The Labelling of Food Regulations 1967 does not control matters of claims and misleading descriptions, which are the subject of proposals currently undergoing consideration.

*The Coffee and Coffee Product Regulations 1967
(S.I. 1967 No. 1865)*

These regulations supersede the Food Standards (Liquid Coffee Essences) Order 1945; the Food Standards (Coffee Mixtures) Order 1952 and article 7 (3) of the Labelling of Food Order 1953. They operate from 4th January 1971.

The regulations.

- a specify compositional and labelling requirements for coffee, decaffeinated coffee and coffee products.
- b prescribe appropriate designations for decaffeinated coffee and coffee products.
- c place restrictions on the use of the words "French Coffee" and "Viennese Coffee".

The Ice Cream Regulations 1967 (S.I. 1967 1866)

These regulations which are operative from 4th January 1971 supersede the Food Standards (Ice Cream) Regulations 1959 and the provisions of the Labelling of Food Order 1953 which relates to ice cream.

The regulations specify compositional, labelling and advertisement requirements for ice cream.

The Margarine Regulations 1967 (S.I. 1967 No. 1867)

These regulations which come into operation on 4th January 1971 will supersede the Food Standards (Margarine) Order 1954, the Food Standards (Butter and Margarine) Regulations 1955 (insofar as they relate to margarine) and Part N A of the Labelling of Food Order 1953.

The regulations specify requirements regarding composition, labelling and advertisement of margarine.

*The Food (Control of Irradiation) Regulations 1967
(S.I. 1967 No. 385)*

These regulations which will become operative in June, prohibit the use of ionising radiation in the preparation of food intended for human consumption. The sale and importation of foods so treated are also prohibited.

The Carcinogenic Substances Regulations 1967

These regulations control the manufacture and use of carcinogenic substances in industry. They do not in actual fact control the use of such substances in the Public Analyst's laboratory, but nevertheless from a point of worker protection the regulations are noted and voluntarily accepted in practice.

The Toys (Safety) Regulations 1967

Operative from November 1st 1967 these regulations regulate maximum metallic contents in paint used on toys. Lead, Antimony, Barium, Cadmium, Chromium and Arsenic are subject to limits. Toys containing cellulose nitrate (celluloid) are also prohibited with the exception of ping-pong balls.

Proposals for Regulations

Details of proposals for regulations for the items detailed below were published during the year. Comments from interested parties are invited regarding the matter before the making of the statutory regulations.

Claims and Misleading Descriptions on Labels and Advertisements of Food Proposals

At present legislations relating to claims and misleading descriptions of food are incorporated in the Labelling of Food Order 1953, the relevant sections of these regulations have, however, not been incorporated in the Labelling of Food Regulations 1967, the subject being deemed of sufficient importance to warrant the making of separate regulations.

The proposals will restrict the use of descriptions such as, the designation of a flavour, 'home-made', 'butter', 'dried', etc.

The products 'vinegar', 'liqueur chocolate', and 'shandy', are defined, shandy being required to contain not less than 1.5% of proof spirit.

Claims relating to energy, protein, vitamins, minerals, slimming, diabetes, tonic, restorative and medicinal are regulated. Methods of labelling when vitamins or minerals are claimed are defined.

Skimmed Milk with Non-Milk Fat Regulations (Proposals for Amendment)

These proposals for amendment are to grant exemption for certain proprietary products from the need to label their products as "Unfit for Babies".

Forthcoming Legislation on the Safety, Quality and Description of Drugs and Medicines

These proposals have been recently incorporated in the Medicines Bill. The manufacture of drugs will now be regulated by licence and an inspectorate is to be set up to sample drugs from manufacturers and from pharmacies. It is expected that the facilities of public analysts will be employed in the analysis of such samples. The Bill also proposes hygiene regulations for drugs on lines similar to the Food Hygiene Regulations.

Food Standards Committee Report on Cream

The main recommendations of the Report are:

- a that minimum fat contents should be laid down for whipping cream, whipped cream (35%), half cream (12%), sterilized half cream (12%), in addition to the present standards for clotted cream (48%), double cream (48%), and sterilized cream (23%). It is proposed that the standard for cream (single cream) be raised from 18 to 20%.
- b that where appropriate, except for clotted cream, the designation 'untreated', 'pasteurised', 'Ultra-heat treated', 'V.H.T.' should be used to denote the degree or otherwise of heat treatment.

Food Additives and Contaminants Committee

Second Report on Cyclamates

This report confirmed the Committee's previous advice that there would be no risk to health in allowing the use of cyclamates in food without limitation except for soft drinks and ice cream. The regulations regarding artificial sweeteners were accordingly made and are noted under the section of this report on Regulations.

Toxic Chemicals in Agriculture and Food Storage; Aldrin and Dieldrin Residues in Foods.

This report states that the following statutory limits should be laid down for residues of aldrin and dieldrin in foods sold in the United Kingdom; 0·1 p.p.m. in food except mutton (1·0 p.p.m.) liquid milk (0·003 p.p.m.) and baby foods, including dried milk (0·02 p.p.m.).

Milk

Of the 1136 samples of milk submitted by the sampling officers, 1004 were examined compositionally, an average of 3·69% fat and 8·60% solids not fat being obtained. Although the average fat content of milk examined in Leicester has remained virtually static at about 3·7% for a number of years, the solids-not-fat figure continues to show a slight but steady decline as shown in the table below:—

Annual average composition of milk

Year	Fat %	Solids not Fat %	No. of samples examined
1963	3·70	8·76	1008
1964	3·71	8·72	985
1965	3·73	8·71	1005
1966	3·72	8·67	1038
1967	3·69	8·60	1004

During the year three samples of milk were rejected for fat deficiency, the worst being deficient of 10·0% of the required minimum of 3% fat. A further 17 samples were

deficient of the required minimum of 8·5% solids not fat and all were shown to contain added water by the Hortvet freezing-point test in amounts ranging from 2·2 to 15·9%. A further sample was rejected because of the presence of penicillin.

Hygienic Quality of Milk

The high efficiency of Leicester dairies is reflected in the fact that during the whole of 1967 only three samples examined out of 846 failed the methylene blue test for keeping quality and no sample failed the phosphatase test for efficiency of heat treatment by pasteurisation.

Food (other than milk) and Drug Samples

During 1967 the food officers for Leicester submitted 780 food samples and 101 drug samples. Of the food samples 20 were submitted as formal samples. A further 30 samples, all food, were submitted by private persons. In 41 instances food samples were rejected, 4 for labelling irregularities, 6 for the presence of foreign bodies and 31 for compositional objects. This represents a rejection rate of approximately 5·1% for foods.

Of the 101 drug samples, 11 were found wanting for various causes, constituting a rejection rate of about 10%. The overall rejection rate for Food and Drug samples (excluding milks) was 5·7%.

Labelling Irregularities

A Blackcurrant Health Drink was labelled 'contains not less than 0·035% sulphur dioxide' whereas the maximum permitted sulphur dioxide of such a product is 0·035%. Further the declared list of ingredients did not mention 'colour' which was found to be present in the form of Red 10 D (a permitted food colour). Soft drinks are exempt from the Labelling of Food Order requirement to declare ingredients, but if voluntarily declared they should be complete and correct.

Two samples of artificial flavouring powders were criticised because, being artificial flavours, the label bore pictorial representations of natural fruit. Further, these samples contained cyclamate constituting a contravention of the Artificial Sweeteners in Food Order, 1953.

Samples Containing Foreign Matter

The majority of the samples submitted by private persons come into this category, but it is remarkable that 1967 produced few specimens of this type. Two samples of Cheese Spread were submitted, one contained an insect and the other supported a mature mould growth beneath the tinfoil wrapping. A specimen of bread contained pellets of charred and gelatinised starchy matter. Sugar contained foreign matter identified as vegetable tissue. Pork Luncheon Meat was contaminated with machine grease. Canned Grapefruit contained numerous small spherical bodies which were suspected to be bacterial growth. Chemical and microscopical tests, however, showed that these bodies consisted of clusters of acicular crystals of naringen. Naringen is a natural bitter constituent of grapefruit, most abundant in immature fruit. Its crystallisation in canned grapefruit is promoted by long storage and refrigeration.

Compositional Defects

Pork Sausage

89 samples of Pork Sausage were examined, of which 11 were rejected (i.e. 12·3% as compared with 10·4% for 1966). Pork Sausage is required to contain at least 65% of total meat of which not less than a half should be lean meat. Four samples were deficient of total meat content but were acceptable regarding lean meat content. Three samples were prepared from fatty pork and were deficient of lean meat and the remaining 4 rejected samples were deficient of both lean and total meat content.

Kabli Chana

Kabli Chana is an Indian dish consisting of chickpeas in a spiced sauce containing tomatoes, onions and garlic. Two private samples of this preparation were submitted, one tin contained only an aqueous solution of citric acid and salt, whilst the second sample contained a small amount of Tindas fruit (a fruit reminiscent of a green tomato) in a similar solution as found in the first can. A formal sample consisted of 55 grams of Tindas fruit in 220 grams of an aqueous salt solution and was reported against as not being of the substance or nature of the preparation demanded, namely Kabli Chana. Furthermore the sample, considered as an incorrectly labelled specimen of canned Tindas fruit, was deficient of a reasonable amount of Tindas, only 20% of fruit being present in the sample submitted. The case was the subject of legal action, a fine being imposed.

Butter

A sample of butter was submitted which exhibited variation of colour throughout the body of the sample. Examination of various portions proved the sample to be a blend of butter inefficiently mixed. Another specimen showed definite indications of rancidity.

Prohibited Colours

Blue V.R.S., a synthetic dye prohibited from use in foodstuffs since June, 1967, was detected in samples of Greengage Table Jelly and a sample of Brown Colouring fluid intended for use in foods. All the samples were old stock and were subsequently removed from sale.

Gin

This sample was found to have an alcoholic content of 60·1% proof spirit. Legal action was taken since it was calculated that it contained approximately 7·5% of added water reducing the alcoholic strength below the legal limit of 65% proof spirit. A fine of £25 was imposed.

Cheese

The Cheese Regulations 1965 became operative from 1st February 1967 and imposed compositional standards for cheese. Full-fat Soft Cheese is required to contain a minimum of 20% milk fat and a maximum of 60% of moisture. Sample No. 560 was found to contain only 19·5% of fat accompanied by an excessive moisture content of 60·5%. Two samples of Low Fat Soft Cheese (sample Nos. 616 and 2513) were found to contain an excess of fat, 14·8% and 13·2% respectively being found as compared with a statutory maximum of 10%.

Tomato Juice

Three samples of tomato juice with added sugar and salt were rejected as being deficient of tomato juice. These analyses were based upon the phosphate and potash contents of tomato. Subsequent communication with the canners established friendly co-operation regarding the analysis of Tomato products and as a result of a series of analyses carried out on authentic specimens of imported Tomato puree it was established that Hungarian and Portuguese Tomato purees were naturally deficient of potash leading to the opinion expressed that the canned products contained only approximately 70% of Tomato juice.

Strawberry Flavour Syrup (Sample No. 1338)

This sample was found to contain a slight excess of the permitted 800 parts per million of benzoic acid preservative. Subsequent samples were acceptable.

Mincemeat (Sample No. 1407)

Mincemeat is required to contain not less than 30% of dried fruit and peel, whereas only 27% was found in this sample. A subsequent formal sample was found to contain a very slight excess of the minimum requirement and so had to be pronounced satisfactory.

Potato Crisps (PA 26)

These crisps were badly discoloured and had been prepared from bruised potato. They were rejected as being not of the quality demanded.

Double Cream (No. 640)

Double cream is required to contain not less than 48% of milk fat, whereas this sample contained only 46·9% of milk fat.

Irish Stew (Canned) (No. 541)

It is considered that Irish Stew should contain at least 35% of meat whereas only 25% of total meat was found in sample No. 541. There has been some argument as to whether Irish Stew labelled as a 'ready meal' would be permitted to contain only 12·5% of meat but it is generally agreed that the product labelled simply as 'Irish Stew' should have a meat content of 35% minimum.

Drugs

One hundred and one drug samples were examined during 1967 of which eleven were given adverse reports. Five of these adverse reports were concerned with labelling irregularities detailed as follows:—

Eye Lotion (1126)

The sample was satisfactorily compounded in accordance with the declared formula but the labelling omitted the cautionary notice "For external use only". The manufacturers agreed to amend the labelling of all future supplies to comply with this recommendation.

Halibut Liver Oil

The label on the bottle did not claim the presence of vitamins but the labelling of the carton implied its use as a food adjunct and stated that it was a 'rich natural source of vitamins A and D'. No statement of minimum content of

vitamins A and D was given as required by the Labelling of Food Order 1953.

Face Bleach and Bleach and Glow Cream

These samples were submitted on behalf of a general stores proprietor who wished to stock them for sale to persons of Asian and African origin. Both samples contained mercury ammonium chloride which rendered them subject to Part 1 of the poisons regulations. Hence such samples must only be sold by Authorised Sellers of poisons and must be labelled with the name of the seller and address of the premises where the sale was made. Furthermore the Bleach and Glow Cream was labelled in a contradictory manner in that a stick-on label declared that it contained 3% w/w of ammoniated mercury whilst the jar was printed with the words 'contains 2½% ammoniated mercury'.

Ferrol Compound Cough Mixture

This preparation contained strychnine which rendered it a Part 1 poison restricted for sale by authorised sellers of poisons only. The sample was devoid of the name and address of the seller, an omission constituting a contravention of the Pharmacy and Poisons Act 1933.

Drugs adversely reported due to compositional defects

Rose Hip Syrup (No. 539)

A deficiency of 17% of the declared Vitamin C content of 82 mgm per fluid ounce was found.

Friars Balsam

Friars Balsam is an alcoholic solution of natural gums which is required by the British Pharmaceutical Codes to contain between 16% and 20% of total solids. Four samples were rejected for containing an excess of 20% solid matter, no doubt due to evaporation of the alcoholic solvent.

Miscellaneous Samples

This category of samples includes all samples examined except those submitted by the Leicester City Authority for analysis under the Food and Drugs Act 1955, the Rag Flock Act, and the Fertilisers and Feeding Stuffs Act 1926. In the preparation of a concise report of this nature it is difficult to convey the enormous variety of problems which are elucidated by the analysis of samples submitted from such a variety of sources. A service is provided to Corporation Departments, other Local Authorities, industry and private persons regarding any problem where a scientific approach might provide a solution or explanation. The acquisition of gas chromatographic apparatus has been of considerable help in these problems and this technique has been used to determine the peppermint oil content of peppermints, insecticide contamination of water and food, identification of diesel oil in seepage waters, comparison of hydrocarbon oils, etc. One of the most widely known uses of gas chromatography is for the estimation of alcohol in blood and urine. The laboratory is one of only five laboratories in the Midlands which undertakes the examination of such samples taken under the Road Safety Act 1967. The following tables give some indication of the wide variety of samples examined during 1967.

Miscellaneous samples: samples examined for Corporation Departments

Health Department

Atmospheric pollution samples	2028
Swimming bath waters	99
City supply water for bacteriological purity	254
Waters, effluents, etc.	37
Fish bait	1
Insect (for identification)	1
Tablet (for identification)	1
Wallpaper (for examination for urine)	1
Honey	1
	c/f 2423

Welfare Department

	b/f 2423
Boiler Waters	102 102

Central Purchasing Department

Antifreeze	13
Cleaning materials	64
Disinfectant	9
Textiles	2
Paint	7 95

Housing Department

Waters	5 5
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Parks Department

Soil	1 1
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Engineer's Department

Compost	1 1
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Architect's Department

Asphalt	1
Concrete	2
Paint	1 4

Public Protection Department

Toys for lead	16 16
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Water Department

Concrete	1 1
	c/f 2648

Samples examined for other Local Authorities

	b/f 2648
Ashby-de-la-Zouch R D C	1
Ashby-de-la-Zouch U D C	2
Barrow-on-Soar R D C	3
Billesdon R D C	22
Blaby R D C	7
Castle Donington R D C	7
Coalville U D C	9
Hinckley U D C	154
Leicester County Council	64
Lutterworth R D C	29
Market Bosworth R D C	3
Melton and Belvoir R D C	4
Melton Mowbray U D C	43
North West Leicester Water Board	163
Nottingham C C	5
Oadby U D C	8
Oakham U D C	1
Uppingham U D C	4
West Kesteven R D C	4
	533

Consulting Service

Food and Drugs Samples

Alcoholic drinks	5
Soft drinks	13
Beverages (Cocoa, coffee, tea, etc.)	3
Dairy products	58
Fruit and vegetables	6
Meat products	19
Cereals and flour products	11
Sugar confectionery	2
Egg (pasteurised)	1
Lactose B.P.	4
Potato preservative	1
Edible oils	2
	125

Miscellaneous Samples

Cement, concrete, aggregate, etc.	39
Waters, effluents, sewages, etc.	560
Fertilisers, manures, etc.	5
Textiles, clothing, etc.	3
Air for presence of petroleum vapour	9
Paints, turpentine, etc.	10
Cleaning materials, soaps, polishes, etc.	11
Washed bottles for bacteriological quality	6
Pathological specimens	3
Sundry samples	11
	657

Total 3963

Atmospheric Pollutions

Daily estimates of the smoke and sulphur dioxide contents of the air are made from five sites situated at Wanlip, Midland House, Nedham Street, Southfields and Grey Friars. In addition, three deposit gauges are maintained at the Town Hall, Crown Hills and the Emily Fortey School (Western Park), from which monthly analyses are made.

An indication of the state of pollution of the air in Leicester is given in the following tables, there being a noticeable improvement in the smoke content of the atmosphere.

Average Daily Smoke and Sulphur Dioxide (SO_2) Concentration

	in micrograms per cubic metre									
	Nedham Street Smoke SO_2		Southfields Smoke SO_2		Grey Friars Smoke SO_2		Wanlip Smoke SO_2		Midland House Smoke SO_2	
January	154	209	99	100	95	294	74	77	.	.
February	114	176	80	86	69	269	80	63	.	.
March	56	130	32	52	36	157	17	36	.	.
April	76	129	58	80	49	191	39	68	.	.
May	63	113	36	53	36	164	22	36	.	.
June	42	100	27	58	24	91	15	40	40	172
July	26	66	15	33	11	72	10	26	32	64
August	42	87	30	49	19	84	22	31	37	63
September	58	85	41	61	32	121	25	33	53	115
October	53	94	28	36	34	169	21	28	61	158
November	128	148	55	91	86	274	75	56	97	282
December	144	241	109	116	92	237	92	60	109	249
Average 1967	80	132	51	68	49	177	41	46	61	143
Average 1966	94	135	62	69	59	176	62	65	.	.

Deposit from Standard Deposit Gauges in tons per square mile per month

Town Hall	1967	1966	1965	1964	Crown Hills	1967	1966	1965	1964	Western Park	1967	1966	1965	1964
Tar	0.10	0.12	0.08	0.10	Tar	0.03	0.03	0.05	0.04	Tar	0.04	0.04	0.03	0.06
Soot	2.57	2.88	2.18	2.16	Soot	1.24	1.30	1.46	1.38	Soot	1.06	1.23	1.21	1.06
Ash	8.60	5.85	4.29	4.37	Ash	1.95	2.35	2.44	2.20	Ash	1.83	2.12	1.80	2.05
Soluble deposit	6.14	7.21	6.74	6.34	Soluble deposit	3.65	4.84	4.96	3.95	Soluble deposit	3.44	4.29	4.54	3.77
Total deposit	17.41	16.06	13.29	12.97	Total deposit	6.87	8.52	8.91	7.57	Total deposit	6.37	7.68	7.58	6.94

Swimming Bath Waters

Ninety-nine samples were submitted for examination, of which two were the subject of adverse comments. Both samples contained insufficient chlorine to provide an adequate safety margin to bathers and one contained B coli organisms to the extent of eight organisms per 100 mils. All samples taken from Corporation baths were bacteriologically beyond reproach and the unblemished record of the Baths Department has been maintained.

Fertilisers and Feeding Stuffs

Fifty-one samples were submitted for examination under the Fertiliser and Feeding Stuffs Act 1926 consisting of forty-one fertilisers and ten animal feeding stuffs. A further two samples were examined for private persons. All the feeding stuffs were accepted as satisfactory whilst ten of the fertiliser samples received adverse reports as summarised below:—

Bone Meal (2 samples)

One contained excess of nitrogen whilst the other was deficient of the declared phosphate content.

Fish Manure

Deficient of the declared phosphate content.

Rose Fertilisers (3 samples)

All were deficient of the declared nitrogen content, two were deficient of phosphate and one contained an excess of potash.

Tomato Fertiliser

Whilst containing the correct total phosphate content, over-long storage had resulted in the soluble phosphate reverting to the insoluble form.

Lawn Fertiliser

Contained excess of nitrogen.

Compound Fertiliser (2 samples)

Both contained an excess of declared phosphate.

Water Supplies

Table 1 Number of routine samples of raw and final waters examined during the year ended 31st December, 1967.

Source of sample			
Waters before and during treatment		Bacterio-Chemical	logical Biological
Swithland reservoir	51	51	57
Cropston reservoir	54	51	76
Thornton reservoir	105	101	151
Waters in supply			
River Dove aqueduct	63	53	:
Derwent Valley aqueduct	102	102	:
Hallgates Filter Station	68	51	:
Blended supply from Hallgates			
No. 4 reservoir	166	161	:
Thornton Works	104	103	3
Totals	503	470	3

I am indebted to Mr. H. Wallhouse, M.I.C.E., F.A.S.C.E., M.I.W.E., A.M.I.Mech.E., Water Engineer, for the following report on the work of his Department during 1967.

- a The water supply throughout the City area has been satisfactory in quality and quantity.
- b A systematic continuous programme of flushing has been maintained to remove sedimentary deposits from the mains. Pyrethrin, at a dose of 0·01 parts per million, was used in two periods of a week each to control *Asellus aquaticus* in the distribution system.
- c At 30th September, 1967 there were 94,665 separately rated dwellings within the City, all of which are supplied with Corporation water. The population supplied is that of the City. The Registrar General's latest available returns shows a figure of 282,800, which is mid-1967. Supplies direct into houses: 100% for permanent dwellers, so far as known, but separate records for possible remaining supplies by standpipes are not maintained.
- d Supplied by standpipes: Nil—so far as known—see above. (This return does not take into account people living in mobile dwellings for limited periods on any one site).
- e The information concerning fluoride content will be found in Tables '5' and '6'.
- f Summary of bacteriological examinations are given in Tables '2' and '3'.
- g No instance of plumbo-solvency has been reported.
- h Plans for fluoridation of the City supply are in abeyance pending approval by the Ministry of Housing and Local Government and the easing of financial restrictions on local authorities.

WATER SUPPLIES

Table 2 Summary of bacteriological examinations

Water before and during treatment Frequency distribution

Source	No. of Samples	Presumptive Coliform organisms M P N per 100 ml					Presumptive Esch. Coli. type 1 M P N per 100 ml					No. of Samples	Agar plate count per ml (2 days at 37°C)			
		0	1-9	10-99	100+	1000+	0	1-9	10-99	100+	1000+		0-9	10-99	100+	1000+
Thornton Reservoir	99	4	29	32	28	6	9	35	43	11	1	99	2	25	69	3
Swithland Reservoir	51	0	4	18	25	4	0	9	35	6	1	51	0	34	16	1
Cropston Reservoir	51	3	8	19	15	6	5	17	14	14	1	51	4	27	20	0

Table 3 Summary of bacteriological examinations

Water in supply Frequency distribution

Source	No. of samples	Coliform organisms M P N per 100 ml				Escherichia Coli. type 1 M P N per 100 ml				No. of Samples	Agar plate Count per ml (2 days at 37°C)			
		0	1-2	3-10	10+	0	1-2	3-10	10+		0-9	10-99	100+	
Dove Treated water aqueduct	53	52	.	1	.	53	.	.	.	53	46	7	.	
Derwent Treated water aqueduct	102	102	.	.	.	102	.	.	.	102	102	.	.	
Hallgates Final Water	51	51	.	.	.	51	.	.	.	50	46	4	.	
No. 4 reservoir Mixed blend to City	157	157	.	.	.	157	.	.	.	155	143	12	.	
Thornton Final Water	103	102	.	.	1	102	.	1	.	103	27	52	24	

Table 4 Average analyses of waters in supply 1967 District 5

Results in parts per million unless otherwise stated

Source	Thornton final water at Works	Dove final water at Works	Dove aqueduct at Hallgates	Derwent aqueduct at Hallgates	Hallgates final water at Works
pH Value	7.6	7.8	7.8	9.2	7.2
Electrical conductivity (micromhos)	465	530	525	137	350
Colour (Hazen units)	11	below 5	5	6	6
Turbidity (units)	1.5	0	0	0.5	0.5
Ammoniacal Nitrogen (N)	0.04	0.01	.	0.03	.
Albuminoid nitrogen (N)	0.25	0.11	.	0.02	.
Nitrite nitrogen (N)	Nil	Nil	.	0.003	.
Nitrate nitrogen (N)	.	1.5	.	0.3	.
Permanganate value (O)	2.7	1.4	.	0.6	1.5
Total alkalinity (CaCO_3)	122	138	.	16	74
Carbonate hardness (CaCO_3)	122	138	.	16	74
Non-carbonate hardness (CaCO_3)	104	134	.	33	103
Total hardness (CaCO_3)	226	272	265	49	177
Calcium hardness (CaCO_3)	143	196	.	33	.
Magnesium hardness (CaCO_3)	83	75	.	16	.
Total dissolved solids	.	385	.	91	.
Silica (SiO_2)	.	2.5	.	6	.
Chloride (Cl)	37	34	35	11	26
Sulphate (SO_4)	85	106	.	32	79
Phosphate (PO_4)	.	0.02	.	.	.
Sodium (Na)	.	.	15	5	9
Iron (Fe)	0.03	0.03	0.02	0.03	0.02
Manganese (Mn)	0.03	0.00	Nil	0.04	0.02
Aluminium (Al)	0.26	.	.	0.11	0.14
Synthetic detergents (Manoxol)	.	0.07	.	0.04	.
Fluoride (F)	.	0.24	.	0.06	.
Residual chlorine-free	0.2	0.2	0.00	Nil	0.9
Total	0.4	0.35	0.05	0.10	1.7
Number of samples examined	103	303	63	102	53

Table 5 Average analyses of surface waters before treatment 1967

Table shows the annual average and the range of monthly results or averages where appropriate.
Results in parts per million unless otherwise stated

	Source	Thornton reservoir Range	Average	Swithland reservoir Range	Average	Cropston reservoir Range	Average
	Temperature °C	3·6–19·5	10·2	4·3–21·2	11·3	3·3–20·8	10·7
	pH value	7·9–8·8	8·3	8·15–9·15	8·55	7·9–8·25	8·05
Electrical conductivity (micromhos)	430–480	460		395–430	420	335–370	350
Colour (Hazen units)	19–32	24		14–27	19	13–29	18
Turbidity (units)	3·5–16	9		2–9	6	1·5–8	4
Ammoniacal Nitrogen (as N)	0·03–0·31	0·14		0·00–0·06	0·02	0·00–0·16	0·07
Albuminoid Nitrogen (as N)	0·30–0·82	0·46		0·25–0·71	0·40	0·16–0·48	0·27
Nitrite nitrogen (as N)	0·00–0·04	0·016		0·00–0·02	0·008	0·00–0·02	0·010
Nitrate nitrogen (as N)	0·1–1·3	0·9		0·1–2·4	0·9	0·6–1·7	1·2
Permanganate value (as O)	1·2–4·8	3·4		2·4–3·8	3·0	2·1–3·7	2·8
Dissolved oxygen (as O)	7·1–13·3	11·6		9·4–15·0	11·8	8·1–12·8	10·6
Total alkalinity (as CaCO ₃)	126–148	139		108–128	118	76–94	85
Carbonate hardness (as CaCO ₃)	126–148	139		108–128	118	76–94	85
Non-carbonate hardness (as CaCO ₃)	88–106	96		102–114	107	82–99	90
Total hardness (as CaCO ₃)	214–254	235		210–240	224	168–184	175
Calcium hardness (as CaCO ₃)	124–148	137		126–152	135	102–109	106
Magnesium hardness (as CaCO ₃)	88–114	97		84–88	86	62–74	68
Total dissolved solids	320–355	340		290–315	305	230–265	255
Silica (as SiO ₂)	0·9–7·1	3·4		0·5–6·0	1·9	0·7–6·0	3·1
Chloride (as Cl)	30–36	33		23–27	24	21–24	22
Sulphate (as SO ₄)	75–82	79		82–92	88	69–79	74
Phosphate (as PO ₄)	0·05–0·25	0·15		0·01–0·75	0·2	0·00–0·05	0·02
Sodium (Na)	18–21	20		8–13	11	10–12	11
Iron (as Fe)	0·05–0·20	0·13		0·02–0·09	0·06	0·05–0·27	0·12
Manganese (as Mn)	0·03–0·27	0·11		0·04–0·85	0·26	0·02–0·14	0·05
Aluminium (as Al)		0·2		0·00–0·07	0·2	0·00–0·21	0·07
Synthetic detergents (as Manoxol OT)	0·02–0·16	0·07		0·02–0·10	0·06	0·00–0·11	0·06
Fluoride (as F)	0·22–0·24	0·23		0·20–0·26	0·23	0·18–0·24	0·22
Number of samples examined	100			51		51	

Table 6 Average analysis of blended supply to Leicester 1967

Table shows the analytical averages for 1967 of the blended supply from No. 4 Service Reservoir, Hallgates, together with the range of monthly results or averages where appropriate
 Results in parts per million (milligrams per litre) unless otherwise stated

			Minimum	Maximum	Average
	pH value	0.05	7.65	8.05	7.85
Electrical conductivity (micromhos)	5	290	375	310	
Colour (Hazen units)	1	below 5	7	5	
Turbidity (units)	0.5	0.5	1.0	0.5	
Ammoniacal nitrogen (as N)	0.01	0.02	0.20	0.08	
Albuminoid nitrogen (as N)	0.01	0.04	0.10	0.08	
Nitrite Nitrogen (as N)	0.001	Nil	0.002	0.000	
Nitrate Nitrogen (as N)	0.1	0.5	2.1	1.0	
Permanganate value (as O)	0.1	0.5	1.6	1.1	
Total alkalinity (as CaCO ₃)	1	54	75	64	
Carbonate hardness (as CaCO ₃)	1	54	75	64	
Non-carbonate hardness (as CaCO ₃)	1	70	88	79	
Total hardness (as CaCO ₃)	1	134	179	148	
Calcium hardness (as CaCO ₃)	1	92	130	101	
Magnesium hardness (as CaCO ₃)	1	28	54	42	
Total dissolved solids (dried at 180°C)	5	200	230	220	
Silica (as SiO ₂)	0.1	4.1	4.3	4.2	
Chloride (as Cl)	1	18	25	21	
Sulphate (as SO ₄)	1	62	72	65	
Sodium (as Na)	1	8	10	9	
Iron (as Fe)	0.01	0.01	0.06	0.03	
Manganese (as Mn)	0.01	0.01	0.07	0.03	
Aluminium (as Al)	0.01	0.04	0.11	0.07	
Synthetic detergents (as Manoxol)	0.01	0.02	0.09	0.05	
Fluoride (as F)	0.01	0.13	0.19	0.16	
Residual chlorine-free	0.05	Nil	0.10	0.00	
Total	0.05	0.15	0.40	0.25	
Number of samples examined			162		

I am indebted to Mr. W. R. Shirrefs, T.D., M.I.C.E., M.I.Mun.E., A.M.T.P.I., City Engineer and Surveyor, for the following statement on sewage disposal.

During the year the policy of relieving sections of the combined sewerage system in the City was continued and further lengths of surface water sewer were provided.

No major difficulties were experienced at the Sewage Disposal Works at Wanlip and the quality of the effluent discharged to the River Soar was within the prescribed standards. Notification was received from the Trent River Authority that more stringent standards were being prepared and that these could take effect in 1971. Additional treatment works will undoubtedly be needed to meet the new requirements.

Cremation

I am indebted to Mr. D. G. Clarke, Superintendent Registrar, for the following information which is extracted from his Annual Report.

	1967	1966	1965	1964	1963
Yearly figures of cremation at the Leicester Crematorium	2728	2775	2685	2537	2692
Registration Area of cremations					
City inhabitants	1900				
Non-inhabitants	828				
Total	2728				

Services to Corporation

Superannuation Medical Examinations

The practice, which has been in force for many years, of causing all candidates for entry into the Superannuation Scheme to be medically examined was discontinued in 1966, and the procedure brought into line with that of many other Authorities.

The new system is that the Medical Officer of Health scrutinises a questionnaire regarding the health, past and present, of the candidate. Where information disclosed in a particular instance suggests the need for it, the candidate may be required to have a medical examination, although an enquiry from the Medical Officer of Health to the candidate's family doctor or specialist is sometimes enough to dispel doubts about eligibility for entry to the Superannuation Scheme.

The following table gives the results of the first complete year of operation of the new scheme:—

1st January, 1967 to 31st December, 1967.

1049	Questionnaires submitted
133	Candidates medically examined
14	Failed
22	Deferred

Registration of nursing homes

	Address	No. of beds
Central Nursing Home, 6 University Road	16	
Sundial Nursing Home, Aylestone Road	20	
St. Francis Private Nursing Home, London Road	54	
The Lawn Nursing Home, London Road	22	
Dane Hills Convent	56	
'Ava', Ratcliffe Road	18	

The Medical Inspector of Nursing Homes makes every effort to ascertain the existence of any unregistered Nursing Home and investigates any instances brought to his notice. During 1967 there were six registered Nursing Homes.

Registration of Nurses' Bureaux

There is one nurses' Bureau in the City.

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